



## Supplement to ACNM Annual Report 2008

This document includes additional information submitted by ACNM staff, board members, divisions, and committees on the activities and accomplishments of ACNM in 2008. ACNM staff, board, division, and committee information that is not contained in this document is included in the main 2008 ACNM Annual Report at [www.midwife.org/annualreport2008.pdf](http://www.midwife.org/annualreport2008.pdf).

### Membership Department Supplement

Submitted by George Hamilton, ACNM Director of Membership

The Membership Department markets ACNM membership, processes membership applications and renewals, maintains the ACNM database of members and midwifery practices, maintains the Find A Midwife midwifery practice locator, and oversees the diverse array of membership benefits offered by the College. The Membership Department also manages many programs contributing important non-dues revenue to the College such as the ACNM Industry Partners corporate affiliation program, data licensing, and the College's online store, [www.ShopACNM.com](http://www.ShopACNM.com).

#### 2008 Highlights:

- Membership recruitment campaign aimed at bringing non-member CNMs and CMs back to ACNM by selling the combination of membership value with the benefit of attending the ACNM Annual Meeting at the reduced member price. Results: 4.5 % rate of return resulting in over 135 additional members, many of them Active members.
- Launched the new, interactive, online *Membership & Practice Directory* resource for members in the “Members Only” area of the ACNM Web site. This new product, updated daily with the most current data, is “greener,” more cost effective, and of course, more accurate than the old published directory which it replaced.
- Working with Comnet Marketing completed a fall 2008 telephone lapsed member acquisition program. Calling 1,500 CNMs and CMs whose memberships had lapsed in recent years, the program generated more than 25 returned members.
- Launched the ACNM Industry Partners Program a corporate affiliation program designed to foster communication and strong ongoing relationships between the American College of Nurse-Midwives, our corporate partners, and the ACNM membership through mutual support and recognition. There are three levels of participation in the ACNM Industry Partners Program with benefits commensurate with the financial support at each level.
  - Program Levels
    - Level 1: \$15,000
    - Level 2: \$7,500
    - Level 3: \$2,500
  - 2008 Charter Program Members:

- Level 1: Hologic, Ther-Rx Corporation
  - Level 3: ConceiveX Inc., Cord Blood Registry
- Working with the Membership subcommittee of the Bylaws Implementation Taskforce and the Board of Directors, brought ACNM's member classifications, dues categories, benefits, and membership renewal grace period in line with the new ACNM Bylaws.
- Despite a small decline in total items sold in 2008, ShopACNM.com saw large growth in sales revenue in 2008 spurred by quality new products, strong sales of existing products, and the introduction of ShopACNM as a secure online payment processor for things like the HBLSS Workshops and A.C.N.M. Foundation contributions.

### **Department of Global Outreach Supplement**

Submitted by Anne Atkinson Hyre, CNM, MSN, MPH, ACNM Director of Global Outreach

The ACNM Department of Global Outreach participated in programs in the following countries:

- **Ghana.** ACNM completed its work within the USAID-funded Community Health Planning and Services program. In 2008, ACNM's work focused on tutor and preceptor training for Community Health Nursing Training Schools. In addition, through ACCESS, ACNM worked to introduce a new learning resource package for essential and basic emergency obstetric care into the midwifery education curriculum.
- **Ethiopia.** In Ethiopia, ACNM supported the ACCESS program for the development and implementation of a training package in emergency obstetric care. Through this work, ACNM collaborated with the Ethiopian Society of Ob/Gyns. ACNM also assisted in the development of a training program for Health Extension Workers.
- **Kenya.** ACNM worked to ensure that postpartum and postpartum family planning services are systematically offered to women prior to discharge. In particular, our work targeted providers of postpartum IUDs.
- **Liberia.** With funds from USAID (through Africare) and UNFPA (through the Ministry of Health and Social Welfare), ACNM continued activities to build training capacity in Life-Saving Skills (LSS) and Home-based Life Saving Skills (HBLSS) in Bong, Montserrado, and Nimba counties.
- **Nigeria.** Through ACCESS-FP, ACNM provided a technical update in postpartum family planning, as well as training in IUD and Jadelle provision, to providers from Kano and Zamfara. ACNM also conducted supportive supervision visits to sites where staff had been previously trained.
- **Tanzania.** In Tanzania, ACNM provided technical support to three programs: ACCESS, ACCESS-FP, and the Minnesota International Health Volunteers. ACNM was involved in pre-service midwifery programs, training for postpartum family planning, and implementation of HBLSS. Through the ACCESS-FP

- program, ACNM provided technical assistance to integrate postpartum family planning and PMTCT services.
- **Afghanistan.** ACNM provided support to the USAID-funded Health Services Support Program to develop a community health-worker training manual for postpartum family planning, lactational amenorrhea method, healthy spacing of pregnancies, and method distribution. ACNM also assisted to finalize pictorial messages for training.
  - **Pakistan.** ACNM provided technical assistance to the USAID-funded TACMIL program (led by Abt Associates) to design and implement a ten-day training program for midwifery educators and clinical staff. Annie Clark, ACNM's senior technical advisor, made plans to relocate to Islamabad, Pakistan, where she will provide one year of technical support to the USAID-funded PRIDE program (seconded to Jhpiego).
  - **Albania.** Within the ACCESS-FP program, ACNM provided support to develop and implement training courses for postpartum and postabortion family planning.

In addition to these activities that are carried out by ACNM staff and consultants, many ACNM members are active in assisting midwives throughout the world.

Additional highlights from the year include:

- **International Confederation of Midwives.** In 2008, ICM received funding through UNFPA to implement a three-year program aimed at strengthening midwifery capacity in high priority countries. Within that program, ACNM participated in consultative meetings with ICM and other partners.
- **Life Saving Skills Manual for Midwives, Fourth Edition.** The 4<sup>th</sup> Edition of the LSS manual was completed in 2008. The A.C.N.M. Foundation and the Averting Maternal Death and Disability program at Columbia University provided support for the fourth edition revisions and printing.

### **Finance and Administration Supplement**

Submitted by Tanya Tanner, CNM, MS, MBA, ACNM Treasurer

ACNM Finance and Audit Committee

Treasurer: Tanya Tanner, CNM, MS, MBA

Immediate Past Treasurer: Claire Westdahl, CNM, MPH, FACNM

Board Representatives: Linda Nanni, CNM, MSN, Lynne Himmelreich, CNM, MPH

Appointed Financial Advisor: Joan Slager, CNM, DNP, CPC, FACNM

### **Journal of Midwifery and Women's Health Supplement**

Submitted by Frances E. Likis, DrPH, NP, CNM, Editor-in-Chief

- Volume 53 of the *Journal of Midwifery and Women's Health (JMWH)* contained 574 print pages and 72 electronic-only pages.

- Two continuing education issues on Infectious Disease (53.3) and The Effects of Violence and Trauma on Women's Health (53.6) were published.
- *JMWH* processed 307 submissions and received 278 new submissions. The acceptance rate was 30%.
- Frances E. Likis, CNM, NP, DrPH became the 13<sup>th</sup> Editor-in-Chief of *JMWH* on January 1. Tekoa L. King, CNM, MPH, FACNM, former Editor-in-Chief became the second Deputy Editor, along with Patricia Aikins Murphy, CNM, DrPH, FACNM.
- *JMWH* now has more than 40 *Share with Women* patient education handouts available on a variety of topics. This copyright-free series is available at [http://acnm.org/share\\_with\\_women.cfm](http://acnm.org/share_with_women.cfm) for all health care providers to print and share with their patients.
- *JMWH* launched Global Exchange, an online column that is a forum for women's health reports from settings outside of the United States. Articles are typically about specific populations and/or specific women's health issues that may not be generalizable to larger populations but are of interest to clinicians, have implications for health care policy, and may warrant further research.

### **Research Supplement**

Submitted by Kerri Schuiling, CNM, WHNP, PhD, FACNM, ACNM Senior Staff Researcher

ACNM is one of 27 national organizations collaborating with the Tri-Council for nursing to commission a study of the impact of Advanced Practice Registered Nurses on healthcare quality, safety and effectiveness. Members representing the ACNM in this collaboration are Kerri D. Schuiling, Mary Barger, Holly Kennedy and Lisa Kane Low.

The ACNM national office is working with Mamie Guidera and William McCool to collect data about the impact professional liability has on the practice of nurse-midwifery. The Sr. Staff Researcher, Kerri D. Schuiling assisted with review, editing and posting the survey online for data collection. Analysis of the data will occur during the spring of 2009.

The Benchmarking Project is now being coordinated between the national office and the Division of Standards and Practice. Kerri D. Schuiling is working with the DOSP to maintain an online method of data collection and will work with the DOSP Quality Management Section in the analysis and reporting of the outcome data. The participating practices will receive their reports during the fall of 2009.

Analysis of data collected by the Core Data Surveys from 2006-2008 are being incorporated into a manuscript for potential publication in the *Journal of Midwifery & Women's Health*. Findings include: 1) there is little change in the demographic make-up of ACNM members (including ethnicity and race), 2) the majority of respondents identify clinical midwifery as their primary responsibility in their full-time positions, 3) hospitals and physicians continue to be the largest employers of CNMs/CMs and 4) The 2008 findings suggest that an increasing proportion (19.5%) of CNMs are earning salaries in

the \$80,000 to \$89,000 range, and an even greater proportion (6.4%) are earning more than \$90,000. This represents an upward trend.

### **Education Projects Supplement**

Submitted by Elaine Germano, CNM, DrPH, ACNM Education Projects Manager

The Education Projects Section focuses on enhancing and facilitating midwifery education. To that end, several activities were undertaken in 2008.

The cost-benefit analysis of midwifery education was completed and submitted to the *Journal of Midwifery & Women's Health* for publication. The Excel spreadsheet of the economic model was distributed to the Directors of Midwifery Education (DOME), and a workshop was given for them, walking them through the nuts and bolts of using the spreadsheet to analyze their individual programs.

**Recruitment Efforts.** The first annual "Become a Midwife" Forum, a free, interactive career event for anyone interested in joining the midwifery profession, was held at the ACNM Annual Meeting in Boston and was a real success. This forum will be continued at subsequent annual meetings.

A new avenue for recruitment was opened with our exhibit at the Global Health Missions Conference in November 2008. Many missionaries are aspiring midwives, and our exhibit booth was very busy answering questions and distributing handouts. A new handout on "International Health in Midwifery Education" was developed for the conference, based on responses to an informal survey sent to DOME members.

I also staffed the exhibit booth at the American Public Health Association annual meeting, which received a lot of traffic and inquiries about midwifery.

Another new avenue for recruitment was explored through exhibiting at the National Women's Studies Association annual meeting. This event was not as beneficial and will not be repeated next year.

**Education/Training.** In response to a request from the A.C.N.M. Foundation, I developed a "Train the Trainer" curriculum for the "Sterile Speculum Exam for RNs" webinar that ACNM developed in late 2007 to early 2008. That project was completed on schedule, and I will be involved in follow-up evaluation of the pilot training.

I have continued to represent the ACNM at meetings of the APRN Joint Dialogue Group and the APRN Alliance Workgroup.

### **A.C.N.M. Foundation, Inc. Supplement**

Submitted by Susan Berkun, Director

The 2008 Dorothea M. Lang Pioneer Award, the Foundations most prestigious recognition award, was presented to two exceptional midwifery pioneers, our ‘unsung heroes’: Joan Slager, CNM, MSN, FACNM the Director of Bronson Women’s Service – midwifery practice at Bronson Methodist Hospital in Kalamazoo, MI and Elizabeth M. Cooper, CNM, EdD, FACNM the Associate Professor of Obstetrics/Gynecology & Clinical Nursing, Director, Strong Health Midwifery Group in Rochester NY.

**Foundation Builders:**

Cathryn Anderson, CNM, DrPH  
Lizabeth Andrews  
Royda Ballard, CNM, BSN, FACNM  
Terry Capton-Snell, CNM, FACNM  
Mei Ka Chin, CNM  
Andrew Gegor  
Laraine Guyette, CNM, PhD, FACNM  
Lily Hsia, CNM, MS, CPNP, FACNM  
Timothy R.B. Johnson, MD, FACOG  
Christine Nuger, CNM, MSN, FACNM  
Ruth Payton, CNM, MS, FACNM  
Suzanne M. Smith, CNM, MS, MPH, FACNM  
Andrea Sonenberg, CNM, MS, DNS  
Sally Austen Tom, CNM, MPA, EDM, FACNM  
Thomas D. Thacher, II  
Maria Valentin-Welsh, CNM, MPH  
Deanne Williams, CNM, MS, FACNM

**Region I Supplement**

Submitted by Linda Nanni, CNM, MSN, Region I Representative

Midwives around the region have been busy maintaining ties with their communities by networking with other organizations involved in health care and have been working to further communicate to the community about what midwifery has to offer. They have developed consumer friendly Web sites and speak to consumer groups about the benefits of midwifery care. They are also working with their professional colleagues to further the profession legislatively by trying to establish midwifery boards in several states and taking supervisory language out of statutes. Working at being recognized as licensed independent practitioners (LIPs) is another effort that midwives here have participated in that will aid in hospital privileging. They continue to provide high quality, personalized women’s health care services to thousands of women each year. Midwife involved births continue to rise in all New England states, topped by Maine midwives attending 16.3% of state births in 2008.

**Region II Supplement**

Submitted by Dawn Durain, CNM, MPH, 2008 Region II Representative

The Pennsylvania State Attorney General approved the Prescriptive Authority Regulations for CNMs! They become law upon publication in the Pennsylvania Bulletin. Nurse-midwives with master's degrees or substantial equivalents are eligible to apply. The midwives successfully kept all supervision and direction language out of the regulations and succeeded in inserting language that mirrors the ACOG/ACNM joint statement regarding "as indicated by the health status of the patient." ACNM chapters are exploring what an ACNM state affiliate might look like. Also, we are beginning to write regulations for certified midwives and working with certified professional midwives to work toward licensure in Pennsylvania as well.

### **Region III Supplement**

Submitted by Cecilia Jevitt, CNM, PhD, Region III Representative

The current economic recession troubled the nine southeastern states of Region III long before many other states. However, doing more with less is a southern way of life, and midwifery continued to grow in Region III, which is home to more than 1000 certified nurse-midwives.

Arkansas is the state with the fewest midwives in the region. Louisiana, Mississippi, and Alabama each have about 40 practicing certified nurse-midwives. Louisiana CNMs began re-organizing in the fall of 2008 and will resurrect their chapter, which had been inactive since Hurricane Katrina. Alabama CNMs prepared legislation that would move regulation of CNMs from the Board of Medicine to the Board of Nursing, grant prescriptive privileges and permit the prescription of Schedule III-V Controlled Substances. Student midwives in Arkansas, Alabama, Louisiana, and Mississippi attend distance education programs.

Favorable practice laws and population growth supported an influx of experienced nurse-midwives into North Carolina. More than 300 certified nurse-midwives practice in North Carolina. East Carolina University has a nurse-midwifery education program. North Carolina is one chapter and rotates meetings regularly around the state. South Carolina has more than 100 CNMs. Although South Carolina is one of the smaller states in the southeast, midwifery practice is growing. Charleston is the home of the Medical University of South Carolina's nurse-midwifery program.

Tennessee's Vanderbilt University's nurse-midwifery program is growing and has an expanding faculty practice. More than 100 certified nurse-midwives practice in Tennessee. Georgia has more than 300 practicing certified nurse-midwives. One of the state's oldest and best known practices, the Gatewood Practice in Americus, which was a clinical site for dozens of Emory students, closed in 2008. Emory University continues to educate nurse-midwives.

Florida, with more than 500 practicing certified nurse-midwives, leads the south in CNM activity. CNMs attended 17% of the Florida vaginal births in 2008. Florida is the home to

two nurse-midwifery programs: the University of Florida and the University of Miami. The UF program has changed to doctor of nursing practice as the entry level for CNMs. For the thirteenth year, Florida midwives saw their controlled substances prescription bill defeated. It will be resubmitted in 2009.

Region III anticipates increasing retirement from practice for both midwives and obstetricians. This retirement may be slowed by the sluggish economy but will provide more opportunity for midwives in the long run. Looking for challenging work? Check out Region III.

### **Region IV Supplement**

Submitted by Cathy Collins-Fulea, CNM, MSN, FACNM, Region IV Representative

Region IV is comprised of ten states and the District of Columbia, fourteen chapters, and 11 midwifery education programs. Many awards were given to midwives in our region in 2008. Joyce Roberts from the University of Michigan received the prestigious Hattie Hemschmeyer award. Joani Slager of Michigan received the Dorothea Lange Pioneer Award. We have two new fellows: Cara Krulewitch of DC and Susan Ulrich of Kentucky. Our Regional Award for Excellence went to Martha Cook Carter of West Virginia. Patsey Harmon, also of West Virginia, published *The Blue Cotton Gown: A Midwife's Memoir*, which is narrative nonfiction and reads like a novel. It is the account of a midwife and her husband's practice in contemporary Appalachia.

Once again in 2008 there was a large focus in the region on legislative activity. Wisconsin CNMs worked on a bill to allow breastfeeding in public. They have also been working on removing all statutory language that makes reference to mandated collaboration and changing the statute that governs hospitals, allowing the CNMs to attain independent admitting privileges. Illinois is working on implementation of the Healthy Childbirth Act, which established ten freestanding birth center alternative health care models in a demonstration program. The three chapters in Michigan continue working with the State Chief Nurse Executive and other advanced practice nurses to clarify roles and definitions for advanced practice nurses, as well as BCBS for reimbursement of GYN care. Ohio CNMs developed a very aggressive legislative agenda which includes working with the BON to include newborn care in CNM scope of practice, schedule II prescriptive authority, and re-opening the Medicaid rules for reimbursement of higher level codes. The Maryland Birth Options Preservation Act proposes to end the requirement that CNMs practicing in Maryland have a written agreement with a doctor.

Many chapters increased marketing efforts, including improving or initiating Web sites, showings of *The Business of Being Born*, book signings with Jennifer Block who wrote *Pushed: the Painful Truth about Childbirth and Modern Maternity Care*, and West Virginia had billboards for midwifery awareness. DC's own Ruth Lubic was on the on CBS evening news doing what she does best—promoting midwifery.

In the area of education, conferences were held by chapters in Virginia, Ohio, Michigan, and Illinois. A Birth Summit was held in Chicago with leaders of many top birthing related organizations. The goal was to form a strong coalition to promote midwifery-centered care. Marshall University School of Nursing in West Virginia partnered with Shenandoah University in Virginia for a midwifery distance learning option.

### **Region V Supplement**

Submitted by Lynne Himmelreich, CNM, MPH, Region V Representative

Region V is comprised of 15 states, 24 chapters, and six midwifery education programs.

Like all regions, midwives in Region V face many barriers to practice such as required written collaborative practice agreements, professional liability coverage, and reimbursement. Members in Colorado and Texas have spent the year preparing for their Nurse Practice Act sunset legislation in 2009. Members in other states have monitored and worked on state legislation affecting midwifery.

ACNM and the A.C.N.M. Foundation successfully brought the ACNM Leadership Seminar to Fort Worth, Texas. The seminar was facilitated by Barbara Hughes, CNM, MS, MBA, FACNM. It was well attended and offered a wonderful venue for dialoguing about potential structure changes and state legislative strategies.

Another bright spot is the increase in applications to our educational programs and job openings being posted throughout the region. Practices are growing, proving women desire Midwifery care. With the energy and dedication of the midwives of our region, barriers to practice will continue to be addressed and quality midwifery care for women will continue and grow.

### **Region VI Supplement**

Submitted by Candace Curlee, CNM, MS, Region VI Representative

CNMs in Region VI have taken advantage of grassroots swell from the public to make birth management more consistent with the midwifery model of care. Many presentations of *The Business of Being Born* and *Orgasmic Birth* have been shown in chapter meetings that included the public.

CNMs have made their voices heard through President Obama's Web sites during the transition period and now on the White House Web site.

CNMs have responded ready to help wherever they can when ACNM called for input regarding strategic goals and implementation of new bylaws.

Individual chapters are waxing and waning. California Bay Area Chapter was revitalized this past fall. Through Megan Bower's leadership, the chapter has already become very

active with fundraisers and public awareness events. However, many chapters report poor attendance at chapter meetings.

Region VI midwives continue to implement our philosophy of *with women* by opening new practices as in Idaho with two new birth centers established by Connie Wolcott and Paula Wiens in Boise. CNMs are in the news with major newspaper articles and news Web stories about Ilene Gelbaum's 5000 birth attendance in Orange County, CA, and Lorri Walker and Angela Watson at South Coast Midwifery, also in Orange County, CA.

Western Washington State Chapter CNMs are hard at work on the greatly anticipated 2009 ACNM Annual Meeting. They held a very successful fundraiser midwifery awareness event called Miles for Midwives.

CNMs through the California state organization CNMA are sponsoring a state bill this year that will provide direct access to midwifery care through third-party payers.

### **Accreditation Commission for Midwifery Education Supplement**

Submitted by Jo Ann Burke, ACNM Education Administrative Assistant

The Accreditation Commission for Midwifery Education (ACME, previously the Division of Accreditation) is an autonomous body that is responsible for accreditation of midwifery programs and institutions that meet established quality standards. Recognized by the US Department of Education (USDE) since 1982, the goals of ACME include fostering the development and improvement in the quality of midwifery education and assuring the highest standards of professional competence are maintained. It currently accredits 37 programs at colleges and universities across the US and Puerto Rico. Only recently recognized for institutional accreditation, ACME currently accredits one freestanding institution. ACME is governed by a Board of Commissioners, which implements its work via a Site Visitor Panel, the Board of Review, and Advisory Committee. The ACME offices are in Silver Spring, MD. More information may be found at: <http://www.midwife.org/acme.cfm>

2008 Highlights include:

- ACME is concluding our regular five-year revision of the Criteria for Programmatic Accreditation. The revised criteria reflect the Federal expectation in which the accrediting agency holds programs accountable for outcomes through documentation. The new criteria will have been distributed for comment and will be available at the 2009 Annual Meeting of the American College of Nurse-Midwives.
- The Accreditation Commission for Midwifery Education received a formal name change with the adoption of the new ACNM Bylaws at the May 2008 Boston ACNM Annual Meeting. Formerly known as the Division of Accreditation of the American College of Nurse-Midwives, our new name reflects the financial and administrative autonomy from ACNM.

- ACME was represented at the International Confederation of Midwives in Glasgow, Scotland, in June by Immediate Past Chair Diane Boyer. International accreditation is a major area of interest of the Commission, especially for the future.
- The ACME Board of Commissioners approved a new position on the ACME Advisory Board—Representative of Public Health. Kaveh Khoshnood, PhD, assistant professor in Public Health Practice, Division of Epidemiology of Microbial Diseases at Yale School of Public Health, agreed to fill the position. The board looks forward to having his perspective on this advisory panel.
- Baylor University admitted the first accredited Bachelor to its DNP program in 2008. Several currently accredited programs are anticipated to apply to change their degrees to a DNP starting in 2009.
- The University of Maryland closed.

Many thanks are due to the dedicated volunteers who devote their time and expertise as members of the Site Visitor Panel, Board of Review, Advisory Board, and Board of Commissioners. Without them, the work of the Accreditation Commission for Midwifery Education would not be possible.

Mary C. Brucker, CNM, PhD, FACNM  
Chair, Accreditation Commission for Midwifery Education

ACME Commissioners -

Mary C. Brucker, CNM, PhD, FACNM 6/02-6/12  
Chair, ACME (6/08 - 6/11)

Carol Gisselquist, MA, Member of the Public 5/06-5/16

Laraine Guyette, CNM, PhD, FACNM 10/98-5/09

Heather Reynolds, CNM, MSN, FACNM 10/00-10/10

Susan E. Stone, CNM, DNSc, FACNM 11/05-11/15  
Vice Chair, ACME (11/08 - 11/11)

Sally Tom, CNM, EDM, FACNM 10/07-5/17  
Coordinator, Site Visitor Panel (1/08 – 1/11)

Dawn Durain, CNM, MPH, liaison from ACNM Board of Directors

### **Division of Education Supplement**

Submitted by Barbara Camune CNM, DrPH, FACNM, Chair and Valerie Roe CNM, MS, FACNM, Vice Chair

Chair and Vice Chair Attended:

- Strategic Priority Webinar hosted by ACNM
- Strategic planning group for Goal 3 (increasing the number of CNMs/CMs)
- Multiple phone conferences related to education

Preceptor Initiatives:

- Revived preceptor section with full eight members

- Added an ongoing Free Preceptor Workshop at each Annual Meeting
- Preparation in place for online Preceptor Handbook TBA spring 2010
- Developed a preceptor survey to be given in Seattle
- Work in progress on a national preceptor databank/repository for credentials
- Preceptor listserv updated
- Initiated annual preceptor recognition activities at the Annual Meeting
- Advocated for teaching roundtables at each Annual Meeting
- Added representatives from education directors and practice directors to this group

The Division of Education is developing an online CE module at an affordable rate for release in spring 2009. The module will be “Billing & Coding,” presented by Joan Slager CNM, CPC.

Two groups have been identified to work on further CE development. The Basic Competency Section is working to develop online modules that can be used for ED programs and new grads beyond basics. The Program CE Section will identify CE modules that meet the needs of experienced clinicians, such as advanced fetal monitoring and pelvic floor management.

Education Policy has been monitoring the development and expansion of DNP programs, including :

- Implementation of DNP Programs in midwifery
- Implementation of the Board Certification in Primary Care exam
- Adoption of the Consensus Model of Regulation by state
- Attendance at national Advance Practice Nursing meetings
- Task Force development for evaluating the need for doctoral preparation in midwifery and beyond basic competencies
- Task Force development for models of education systems
- Task Force for the development of a doctorate in midwifery practice

Various ACNM members have been selected to attend policy and issue meetings in their geographic areas for the Division of Education.

### **Division of Research Supplement**

Submitted by Amy Levi, CNM, PhD, FACNM, Chair

The Division of Research focused much of its efforts in the past year on creating a collaboration with the Midwives Alliance of North America (MANA) and the American Association of Birth Centers (AABC) for the development of a data collection instrument that would meet the needs of midwives practicing in all settings. In addition, we continued our efforts to network midwifery researchers, provide informative and educational research presentations and posters at the ACNM Annual Meeting, and collaborate with the International Health Committee to support the presentation of research about international health at the Annual Meeting. The Division of Research

members also provide a research review function for the solicitation of members by those doing research projects.

The section activities are summarized below:

**Data Collaboration.** This winter, the ACNM Board of Directors approved a Memorandum of Understanding with MANA and AABC to support the development of a collaboration among the three organizations to create a data set that would be able to capture the processes and outcomes of midwifery care as provided by CNMs, CMs, LMs, and CPMs in home, birth center, and hospital settings. The product of this collaboration will then be supported by a web-based data collection system that would be available to members of each organization. This is our most ambitious undertaking to date, and represents an incredible alliance among midwifery researchers from each of the participating organizations.

**Research Dissemination.** The process of submitting and reviewing research abstracts for both the research forums and the international health research forum at the Annual Meeting went online this year. This transition was supported by the team at the National Office, and allowed the Division to review a record number of abstracts.

**Networking.** This year our networking activities were expanded in several ways: updates were made to the DOR portion of the ACNM Web site, the membership list moved to the e-midwife listserv to ensure greater participation, and the networking activity at the Annual Meeting will be held in conjunction with the membership meeting to promote membership in the DOR by new PhD/DNP/doctoral study graduates, as well as members who have distinguished themselves by publishing and presenting their research.

**International Section.** The International Section has new leadership, and is transitioning from the proactive and creative leadership of Judith Fullerton to Terri Clark, who will be collaborating more directly with the International Committee to coordinate activities of interest to the membership of both entities.

### **Division of Standards and Practice Supplement**

Submitted by Lisa Kane Low, CNM, PhD, FACNM, Chair

The Division of Standards and Practice is focused on the promotion of midwifery practice by identifying opportunities and addressing potential barriers to midwifery practice while also developing, measuring, and working to maintain standards for the highest quality midwifery practice. The division has five sections: Clinical Practice and Standards, Business, Homebirth, Professional Liability, and Quality Management. Through these sections the work of the Division is conducted.

Each of the sections of the DOSP is active independently as well as collectively as a Division. We review materials and provide input across sections to assure that the breadth and depth of varied aspects of clinical practice are represented in the development of

documents and position statements. However each section also has a scope of work for which they provide leadership and direction within the Division. As a result there are a number of activities occurring at any one time. Below are some descriptions of some of the highlights of the work conducted by the divisions in the various sections.

Last year we had the release of new documents through the Clinical Practice and Structure Section on Management of Rupture of Membranes at Term and Providing Oral Nutrition to Women in Labor. The Clinical Practice Section (chaired by Ann Weathersby) takes the lead on development and review of clinical position statements and clinical bulletins as well as identifies changes in clinical practice that may require education of the membership or the establishment of standard for inclusion within midwifery practice.

The Professional Liability Section (chaired by Bill McCool) has developed and conducted a survey of the national membership regarding the role of legal liability coverage and concern for malpractice risk in midwifery practice. This section has also addressed challenges in securing medical liability coverage for all midwives but in particular those conducting homebirths.

The Business Section (chaired by Joani Slager) has been responsible for the education of members regarding business practices. This has included support for conducting national and regional workshops related to billing and coding for services as well as understanding reimbursement concepts.

The Homebirth Section (chaired by Saras Vedem) has been working with members to identify the level of support for and opportunities for education related to homebirth. Members have provided input through Web-based surveys and results of these surveys are in the publication phases.

Finally the Quality Management Section (chaired by Laurie Jurkiewicz) has been working with members of the ACNM national office staff to institutionalize the process of conducting benchmarking surveys of midwifery practice nationally. This year over 120 practices participated in this project. In addition, members of the Quality Management section have participated in national discussions related to establishment of standard measures for the effectiveness of maternity care.

Overall the activities of the DOSP can be viewed essential to the promotion of midwifery practice and increasing women's access to midwifery care. Through the development and implementation of evidence-based practice standards, the understanding of the legal and business climate and measurement of the quality of midwifery practice provided nationally, the DOSP can be viewed as the backbone division of the ACNM, providing a framework upon which to build successful midwifery practice.

### **Archives Committee Supplement**

Submitted by cochairs Kathleen E. Powderly, CNM, and Lisa Veach, CNM, MN, FACNM

The archives committee has updated and added to our past-president oral history collection.

### **Bylaws Committee Supplement**

Submitted by Jan M. Kriebs, CNM, MSN, FACNM, Chair

The Bylaws Committee supported enactment of complete revision of ACNM bylaws, with over 100 midwives actively contributing to the process of developing them. This revision reformed the College structure to better meet the needs of members and thus the families we care for. 91% of members who voted on the bylaws voted in favor of passing the bylaws.

The committee, with the ACNM board, also assisted in developing a Bylaws Implementation Task Force to form guidelines and educational materials needed for implementation of ACNM's new structure.

### **Ethics Committee Supplement**

Submitted by Elizabeth Sharp, CNM, DrPH, FACNM, Chair

#### **Work Accomplished:**

- Standing Rules of Procedures for the newly formed committee were submitted and approved by the ACNM Board of Directors.
- Members for the ACNM Ethics Committee were recruited and oriented.
- Structure and process were established for conducting the work of the Ethics Committee.
- The newly established Ethics Committee reviewed and endorsed the ACNM Code of Ethics and the ACNM Code of Ethics with Explanatory Statements, approved in 2005.
- Two abstracts submitted by members of the Ethics Committee were accepted for the program at ACNM Annual Meeting 2009.

#### **Work in Progress (Challenges and Activities):**

- At the request of the ACNM Board of Directors, a Task Force of the Ethics Committee, co-chaired by Nancy Fleming and Katy Dawley, is developing a new document, "Leadership Code of Ethical Conduct," that takes into account previous BOD ethical statements as well as introduces additional ethical content that reflects the expanding ethical responsibilities of members in leadership positions in an organization.
- Recruitment for members of the Ethics Committee continues, searching for CNMs and CMs with interest and experience in ethics, or interested in ethics and experienced in a specific area of midwifery not yet represented on the committee.

- Overall planning for promoting publications by members of the Ethics Committee on ethical issues pertaining to midwifery.

Committee Members:

Robyn Brancato CNM, MSN  
Mary K. Collins CNM, MN, JD  
Debra Hein CNM, MSN  
Katy Dawley CNM, MSN, PhD  
Kathleen Powderly CNM, MSN, PhD  
Nancy Jo Reedy CNM, MPH  
Joyce Thompson CNM, MPH, DrPH  
Elizabeth S. Sharp CNM, MSN, DrPH, Chair

**Government Affairs Committee**

Submitted by Heather Bradford, CNM, ARNP, Chair

The Government Affairs Committee consists of 16 CNM/CMs who are the “action” behind ACNM’s grassroots lobbying. We worked tirelessly in 2008 toward passage of S.507, the Midwifery Care Access and Reimbursement Equity Act of 2007, which would provide equitable Medicare reimbursement for midwifery care. This bill passed in the House in 2007, but was not included in the final Senate Medicare bill in 2008. However, we ended the 110<sup>th</sup> Congress with 24 Senate cosponsors and 1 sponsor (with 4 states having both Senators on board – ME, MN, NY, and WA) and 42 cosponsors plus one sponsor in the House, more than we have ever achieved in previous years.

In addition to lobbying for our Medicare bill, we contributed monthly articles for *The Advocate*, an online newsletter designed to communicate ongoing political activity by the College. We also have been extensively involved in planning for the Annual Meeting in Seattle. We will be staffing a booth with the Midwives-PAC, co-hosting the Midwives-PAC Reception, as well as presenting a free half-day workshop on the Nuts and Bolts of Political Action as well as a regular CE entitled State and Federal Legislative Update.

We have achieved these accomplishments through many, many hours of hard work: monthly conference calls, weekly, sometimes daily phone calls and e-mails to ACNM members, patients and legislators, letter writing, constant Web updates to our Medicare page, coalition building, and lots of strategizing. Thank you for responding to our requests for action – we hope midwives can secure equitable reimbursement under Medicare in 2009 so we can finally (after 20 years), move onto another legislative priority. We are always looking for more help on our committee, so if you are ready to roll up your sleeves, please contact Heather Bradford, CNM, chair, at [hbradford@comcast.net](mailto:hbradford@comcast.net).

Members:

Heather Bradford, CNM, ARNP (Chair, Region VI)  
Lynne Himmelreich, CNM, MPH (Board of Directors Liaison)

Julie Bosak, CNM (Region I)  
Susan Jacoby, CNM (Region I)  
Kathryn Kravetz Carr, CNM (Region I)  
Anne Londergan, CNM (Region II)  
Laura Sheperis, CM (Region II)  
Anna Small, CNM, JD (Region III)  
Karen King, CNM (Region IV)  
Cheri Moran, CNM, PhD, FACNM (Region IV)  
Karol Krakauer, CNM (Region V)  
Lynneece Rooney, CNM (Region V)  
Brielle Stoyke, CNM (Region V)  
Jennifer Jagger, CNM (Region VI)  
Kerry-Ann Dacosta, SNM (GAC/PAC Student Representative)  
Jeni Poell, SNM (GAC/PAC Student Representative)  
Patrick Cooney, Federal Lobbyist  
Joanna King, JD, Director, ACNM Government Relations

### **International Health Committee Supplement**

Submitted by Barbara Anderson, CNM, DrPH, FACNM, Chair

At the 2008 Convention in Boston, the IHC committee sponsored a well attended showing of the documentary *A Walk to Beautiful*. This stunning video describes the work of the Fistula Hospital in Addis Ababa, Ethiopia. IHC Chair Barbara Anderson, who has worked at the Fistula Hospital in Ethiopia, offered personal insight about the role that fistulas play in undermining women's health as well as the hopeful work at this hospital. At the 2008 Convention, the International Health Research Forum offered an excellent program, coordinated by Catherine Carr and Christine Hunter. Two sessions of the International Health roundtables were coordinated by incoming IHC chair, Suzanne Stalls. The booth was again a colorful display, thanks to the work of Kay Kramer and Susan Doyle. Thanks to Deborah Ambruster and Ann Richter for their valiant efforts toward furthering the goals of the Bonnie Pedersen award. The committee congratulates Terri Clark, IHC member, for induction as a Fellow in the American College of Nurse-Midwives.

During 2008, the International Health Committee (IHC) updated the International Health page on the ACNM Web site. The committee continued to be involved with the *Life-Saving Skills (LSS)* manual and participating in the LSS workshops. The committee welcomes three new members: Katrina Nardini, Debra Penny, and Gwen Brumbaugh-Keeney as well as a new advisor to the committee, Ann Hyre, ACNM director of global outreach. Special congratulations to incoming IHC chair Suzanne Stalls who will assume the chair position in June 2009 (and also for agreeing to serve as chair of the roundtables ONE MORE TIME for 2009).

Special thanks to all the members of the committee past and present and our wonderful advisors for your wisdom, counsel, and support during my six years as your chair. I look forward to assisting Suzanne in her role as chair and in my new role as past-chair!

### **Midwives of Color Committee Supplement**

Submitted by Bridget Howard, CNM, MSN, Chair

#### Board Representative Activities

- 1) Midwives of Color-Watson Scholarship: scholarship amounts will be decreased slightly this year due to the current economic conditions.
- 2) Urban Midwives Association: \$1000 given to the MOCC for project documenting the history of the committee, our role in funding for scholarship and other initiatives to promote diversity/leadership within midwifery. Funds need to be used by year end of 2010.

#### Committee Activities

- 1) Continued scholarship funding for midwifery students of color.
- 2) Annual meeting social and exhibit booth to raise funding for midwifery scholarships and other venues: research, international work, postgrad/doctoral studies.
- 3) Communication and visibility within the college: our booth and social event at the ACNM Annual Meeting have raised awareness of our committee/goals and allows other midwives to network with our committee members and enjoy cultural dancing/music/poetry.
- 4) Communication/visibility outside of the college: *Minority Nurse* featured article about visibility of culturally and ethnically diverse memberships within nursing associations. Marsha Jackson, FACNM and I were featured. Please see article at [www.minoritynurse.com/nursing-associations/come-make-yourself-home](http://www.minoritynurse.com/nursing-associations/come-make-yourself-home)

#### Committee Goals

- 1) More visibility within the college: midwife representation at all levels of the college so women of color continue to have a voice within health care.
- 2) Communication with committee members: will try to increase yearly. Also continues to be one of our challenges.
- 3) Leadership roles of committee members.
- 4) Volunteers to increase between annual meetings.

#### Accomplishments related to Strategic Goals/Measureable Outcomes

- 1) MOC-Watson Scholarship: is one of the largest endowed scholarships within the foundation. It has continued to grow yearly through donations /fundraising during the annual meetings. We have been able to offer basic midwifery scholarships to an increasing number of students of color over the past five years. Donations can be made out to the A.C.N.M. Foundation with Midwives of Color Committee on the memo line.
- 2) Visibility within the college of ethnically and racially diverse members and continued cultural sensitivity.

## **Nominating Committee Supplement**

Submitted by Suzan Ulrich, CNM, DrPH, FACNM, Chair

The Nominating Committee successfully presented a slate of candidates for the 2009 election, and 22% of the members exercised their voting privilege. This was the second year that an online forum to question the candidates was available to members on the ACNM Web page. The committee revised its operating procedures to align with the new ACNM bylaws.

Members:

Thomas Chappell

Tanya Bailey

Cheri Moran

Suzanne Stalls

Suzan Ulrich, Chair

Fran Ventre

## **Program Committee Supplement**

Submitted by Kate Fouquier, CNM, MSN, Chair

The Program Committee is finalizing plans for the 54<sup>th</sup> Annual Meeting to be held in Seattle. Over this last year, the committee has worked to design an annual meeting that is responsive to the needs of the membership. We are proud of our accomplishments, which include:

- Reciprocal agreement with NPWH for CEU has been successful. Additionally, Sharon has implemented a plan to streamline the approval process.
- Been proactive in including the students into the meeting process by establishing a Student Welcome evening and having the students march into the Opening Celebration.
- We evaluated the speaker selection process and by allowing for 50% of the speakers to be invited, have been able to capture the expertise of speakers for the local areas. Meeting evaluations from the membership have been very positive, with some members commenting that they have returned to our meeting because of the high caliber education sessions that are being offered.
- We will be making small changes within the Seattle meeting such as having a Program Committee member assigned to attend to the needs of our invited speakers, providing greater accessibility to the motion forms, proposed motions and parliamentary before business meetings.
- We are trying a new concept, Tuesday Night at the Movies. This will preview movies of interest to our membership.
- We will advertise for members to submit ideas for Heart of Midwifery and a second session: Voices of Midwifery. Both of these sessions speak to the heart and art of midwifery.

We welcome input from the board and look forward to another successful meeting in May.

### **Student Committee Supplement**

Submitted by Angela Wilson-Liverman, CNM, chair

The Student Committee is comprised of student representatives who meet annually at the Annual Meeting to discuss issues facing student midwives. Student representatives are selected by each accredited midwifery education program. They jointly prepare the Student Report, which is delivered to the ACNM Board of Directors at the Closing Business Meeting. The report was delivered on May 26, 2008, by Dani Williamson of Vanderbilt University and Rebecca White of University of Pennsylvania.

In response to the students, the board voted in 2008 to include a student representative on the ACNM Board of Directors, starting at the Annual Meeting in 2009. The student representative to the board will serve a one-year term and be selected from accredited programs in alphabetical order (first from Baylor, second from Baystate, etc.). The student representative will be an active voice for midwifery students and will be an active participant in ACNM BOD meetings. The student committee looks forward to this exciting change!

### **Uniformed Services Committee Supplement**

Submitted by Michelle L. Munroe, LTC, AN, CNM, Chair

I am honored to be selected as the chairperson for the Uniform Services Committee. At the upcoming Annual Meeting, the Uniform Services Committee meeting will celebrate Midwives on deployment. A panel of midwives who have been deployed will be there to share their stories and have a short and question answer session.

I would like to increase awareness of midwives in the Uniformed Services by having all members attending the conference in their uniform and by wearing their dress uniform on Sunday, 24 May, the date of the Uniform Services Committee meeting.

I look forward to sharing and hearing stories from other midwives and meeting anyone who attends convention. See you in Seattle.