Hospital Credentialing of Certified Nurse-Midwives as Licensed Independent Practitioners

Proposal to the St. Anthony Central Hospital Credentialing Committee
March 18, 2008

Certified Nurse-Midwives (CNMs) in Colorado practice in accordance with national standards, state statute and CMS interpretive guidelines and Joint Commission standards including:

- Standards for the Practice of Midwifery (ACNM 2003)
- Core Competencies for Basic Midwifery Practice (ACNM 2007)
- Joint Statement of Practice Relations Between Obstetrician-Gynecologists and Certified Nurse-Midwives (ACNM/ACOG 2002)
- Colorado Nurse-Practice Act (CRS Title 12-38-111.5 (Requirements for advanced practice nurse registration)
- Interpretive Guidelines for the Medicare Hospital Conditions of Participation (42 CFR, paragraph 482.12)
- Joint Commission Comprehensive Accreditation Manual for Hospitals: The Official Handbook (2008; MS-1 to MS-13)

There are two paths for hospitals to move into alignment with the above guidelines and regulatory bodies, and to minimize physician vicarious liability brought about by hospital by-laws wording that requires physician "supervision" of CNM's.

1. Revise hospital bylaws and/or rules & regulations to make CNM's an Active member of the Medical Staff. This change includes admitting and discharge privileges as well as other rights and responsibilities of Active Staff.

2. Revise hospital bylaws and/or rules & regulations and scope of practice to include admitting and discharge privileges. This change does not include addition of other rights and responsibilities of Active Staff.

Both of the above mechanisms require a clear mechanism for consultation, collaboration and referral and written practice guidelines. One of the many advantages to such changes is to remove a physician's requirement to "supervise" the CNM, a concept that is not required by state or federal statute and is typically not defined in a manner that is useful to the provider(s) nor adds to patient safety. Both mechanisms result in granting LIP (Licensed Independent Practitioner) status to CNMs.

COPIC is in support of either path described above and will serve as a resource for hospitals seeking to change hospital bylaws to remove wording that requires physician supervision of CNM's.
NURSE-MIDWIFERY in the OB/GYN DEPARTMENT
DELINERATION OF PRIVILEGES
ST. ANTHONY HOSPITALS

ELIGIBILITY CRITERIA  To be eligible to request these clinical privileges, the applicant must meet the following criteria:

1. Documentation and completion of an ACNM accredited education program
2. Documentation of current active license as a Registered Nurse in the State of Colorado
3. Current registration in the Colorado Advanced Practice Registry as a Certified Nurse-Midwife
4. Current and continuous certification by the American College of Nurse-Midwives or their designee including the ACNM Certification Council (ACC) or the American Midwifery Certification Board (AMCB)
5. Current and continuous certification in American Heart Association/American Academy of Pediatrics Neonatal Resuscitation Program (NRP)
6. Documentation of current competence to include recent completion of a training program in Nurse-Midwifery or an active clinical practice during the past 24 months, including performance of the privileges requested
7. Documentation of continuing education including current enrollment in the ACNM Certificate Maintenance Program (CMP) which is for CNMs certified in 1996 or after or the ACNM Continuing Competency Assessment Program (CCA) which is for CNMs certified before 1996
8. Evidence of professional liability insurance coverage as specified by the institution
9. Professional references that have worked closely with the applicant in the past 2 years. References must include one reference from a physician and one from a peer
10. Clinical Practice Guidelines that define the practice model and a safe mechanism for consultation, collaboration and referral to a physician as clinically indicated (attach a copy of written Clinical Practice Guidelines)
11. Prescriptive Authority in accordance with the Colorado Nurse-Practice Act. CNMs who do not have Prescriptive Authority must have a physician co-signature of all drug orders

CORE I NURSE-MIDWIFERY: OUTPATIENT CARE

Outpatient nurse-midwifery care: Prenatal, post partum and well-woman GYN care in accordance with ACNM Standards and as described in Clinical Practice Guidelines.

I ATTEST BY SIGNATURE THAT I HAVE MET THE MINIMUM CRITERIA FOR CORE I OB PRIVILEGES AS NOTED ABOVE.

Yes _____  No _____

Applicant’s Signature ____________________________  Printed Name ____________________________  Date ____________________________
CONE II NURSE-MIDWIFERY: INPATIENT CARE

Inpatient nurse-midwifery care including the management of patients during the antepartum, intrapartum and post partum period in accordance with ACNM Standards and as described in Clinical Practice Guidelines.

I ATTEST BY SIGNATURE THAT I HAVE MET THE MINIMUM CRITERIA OF FIFTY (50) PROCEDURES/DIAGNOSIS MANGEMENT FOR CORE II NURSE-MIDWIFERY PRIVILEGES AND I AGREE TO PROVIDE DOCUMENTTION OF PROCEDURE/DIAGNOSIS MANAGEMENT IF REQUESTED.

Yes ___ No ___

_________________________________________  ______________________________  ___________
Applicant’s Signature                                   Printed Name                                      Date

NON-CORE NURSE-MIDWIFERY

I am requesting the following non-core privileges. (Please attach documentation of applicable education, training and experience)

_____ First assist at cesarean delivery

_____ Limited ultrasound: To include 1st Trimester Pregnancy Dating and assessment of AFI, Fetal presentation and biophysical profile (BPP)

_____ Repair of 3rd and 4th degree perineal lacerations

_____ Outlet vacuum extraction

_________________________________________  ______________________________  ___________
Applicant’s Signature                                   Printed Name                                      Date