



College of
Midwives
of Alberta

**New Registrant Program
(New Graduate)
Handbook
2024-2025**

New Registrant Welcome Package

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INTRODUCTION

The College of Midwives of Alberta (CMA) New Registrant Program assists graduate midwifery students to achieve General Registration with a Full Practice Permit in Alberta.

This current New Registrant Program Handbook outlines the components of:

STEP 1: Initial registration process requirements, and resources, and

STEP 2: New Registrant Program completion for you as a new graduate. This program integrates New Registrant, Mentor(s) Midwives, Midwifery Practices and related organizations: College of Midwives of Alberta, Alberta Association of Midwives (AAM), (midwives' professional body) and the AHS Provincial Midwifery Administration Office (PMAO), Alberta's province-wide, fully integrated health system, responsible for delivering health services to Albertans.

The New Registrant Program is evolving and adapting to the current and future professional landscape.

Please do not hesitate to contact the CMA should you have any questions, comments or thoughts at any time throughout the New Registrant Program process at:

info@albertamidwives.org.

Best wishes on your journey in the New Registrant Program.

Sincerely,

CMA Council and Staff

STEP 1: CMA Registration Prior to the New Registrant Program

In Alberta, all New Registrants and new graduates will need to initially register with CMA. Please refer to the Checklist for Registration in Appendix 1 of this document [Checklist for Reviewing an Application for Registration as a New Graduate from an Approved Midwifery Educated Program](#) or the CMA Website: www.albertamidwives.org for information on this part. On the website, find “Registration” to get to the Registration page.” Then click on “Routes to Alberta Midwifery Registration” and read “1) New Graduates from an Approved Canadian Midwifery Education Program”. Then complete the steps required for initial registration. Please contact the Deputy Registrar to help guide you through this process at: admin@albertamidwives.org

STEP 2: The New Registrant Program

Overview

Once your application for initial registration is underway and you have consulted with the Deputy Registrar, you can also start planning for your New Registrant time and the New Registrant Program.

WHO: New Graduates in their first twelve months of practice in Alberta may be eligible. This also may include New Registrants from other Canadian Jurisdictions who have less than twelve months of midwifery experience upon arrival to Alberta. This may also apply to new graduates from outside of Canada. Conversation with the Deputy Registrar will help clarify the process.

WHAT: The New Registrant Program is a structured program following your graduation; a legislated “internship period”. As a New Registrant, you will contract with one Midwifery Practice and one Mentor, for the duration of the New Registrant Program, to achieve the Program requirements.

WHEN: The recommended and ideal time to complete the New Registrant Program is directly after you graduate (within a month of writing the Canadian Midwifery Regulators – CMRE, your entry to practice exam). Some New Registrants have delayed their New Registrant time by some months, due to family or personal reasons, but most will proceed from graduation to the New Registrant Program. Application to the New Registrant Program should ideally start within three (3) months before graduation.

WHERE: Once you are a New Registrant, you can complete your New Registrant Program at any midwifery practice approved by the CMA. You will work at one Midwifery Practice only, with a 1:1 Mentor from the same midwifery practice.

1) CMA supports you to complete your New Registrant Program, with a CMA-approved 1:1 Mentor Midwife and Midwifery Practice. CMA will conduct an application and matching process, using criteria that supports the goals of the New Registrant Program. (Please see CMA matching and approval process in this handbook)

2) AHS (PMAO) positions and funding for New Registrants.

For MRU Midwifery Graduates

Upon graduation and New Registrant registration with the CMA, you are eligible at a minimum to receive a temporary AHS billing number and temporary appointment and privileges in the AHS Midwifery Staff for up to 18 months.

You may apply for any vacant position with a Midwifery Practice as long as the practice meets the CMA New Registrant requirements. Please see the Alberta Association of Midwives (AAM) website for New Registrant job postings. If the position is an AHS approved position, you would be eligible to receive a permanent billing number and can apply for probationary appointment and privileges in the AHS Midwifery Staff.

For Non MRU Graduates

You may apply for any AHS approved position as long as it meets the CMA requirements for the New Registrant Program. Please see above MRU Graduate information, as your process is similar.

Information on job postings, including New Registrant positions, is currently housed on the AAM website: alberta-midwives.ca.

WHY: the concept for the New Registrant Program is embedded in legislation (Midwives Profession Regulation, March 31, 2023) This allows for a period of at least one year, in which you will consolidate your entry to practice knowledge and skills, gain confidence and attain the experience you need to be a Primary Care Midwife Provider in Alberta. New Registrant Programs may also be a preventative and mitigating factor for burnout of registrants in their first five years of their career. Simply put, your midwifery education program gives you the general knowledge you need and the New Registrant Program gives you more opportunity to gain practical knowledge, skills and experience and increase your Primary Care experience within a midwifery practice group and a midwifery business.

HOW: Please consider carefully where you wish to complete your New Registrant Program; including finding a 1:1 Mentor Midwife and an attached Midwifery Practice. This will be your sole midwifery practice for the duration of the New Registrant Program. The following document: New Registrant Checklist – Researching a 1:1 Mentor /Midwifery Practice can assist you in choosing.

New Registrant Checklist - Researching a 1:1 Mentor/Midwifery Practice

Research Time	Your thoughts Pros Cons	Questions to Ask Comments
<p>YOUR influencing factors:</p> <ul style="list-style-type: none"> - Family location - Money - Child care - Ability to move - Location you want to end up in after - MW goals and dreams eg. rural, diverse population - Other? 		
<p>1:1 Mentor Midwife:</p> <ul style="list-style-type: none"> - Positive past experience - Someone you admire - One you would like to know better - Doing important MW work - Help you achieve your birth #s - What if they go on vacation or extended leave? - Mentor fees negotiation? - Other? 		

<p>Midwifery Practice:</p> <ul style="list-style-type: none"> - > 1 Year at this locale - NOT in a residence - Able to gather enough clients from the area - Reputation with NRs, Hx of contract issues - Financial help for your equipment, supplies - Practice fees - Back up fees \$ amt 		
<p>Interview Time</p>		
<p>Mentor:</p> <ul style="list-style-type: none"> - Desire to mentor - Can <u>do</u> 1:1 w/you - Availability: 24/7 & for 1 year or so - “Good Fit” - Privileges: - Hosp 24 hr OB - Conflict managements kills? <p>Midwifery Practice:</p> <ul style="list-style-type: none"> - Advantages of having a New Reg: gain new “staff”, help with practice fees, future RM - Can obtain enough clients? - “Good Fit” - Conflict Management skills? - **See and negotiate contract ** 		

Decision Time		
Best option for YOU: 1:1 Mentor and Midwifery Practice		
Action Time		
1) Sign the CMA Mentor ID form and fill out Application		
2) Submit forms to CMA		
CMA will match you and Mentor and MW Practice		
CMA will send you back confirmation of match		
3) Apply for CMA registration		
4) Apply for CMA CMRE		

You then use the three-part application form attached to apply and submit to CMA. (See Appendix 3). The CMA Registrar/Registration Committee then reviews the application, using a process that supports the goals of the New Registrant Program. Once the CMA has completed this work, you are approved for a Mentor Midwife and Midwifery Practice. (Please see the CMA matching and approval process in this handbook).

New Registrant (New Graduate) Policy

You are required to read this policy completely, as it contains essential information to guide you as a New Registrant and as a new graduate. The New Registrant Policy can be found in the Appendix 2 section of this Handbook and on the CMA Website.

Checklists for the components of the Program are outlined in the Appendices.

**** Please read all of the documents enclosed here very carefully, so that you can skillfully work your way to success as a Primary Care Midwife Provider.****

As stated before, please contact CMA, should you have any questions at:

info@albertamidwives.org

Milestones From End of 4th Year to Practicing as a New Registrant

This period seems like a strange and empty transition time, where your ability to work as a midwife is suspended, and you are no longer a student but waiting for professional processes to happen. Time can move slowly.

Dates	Processes	Your Activities
Early April	4 th Year Classes/Program finishes	Study for the CMRE, Apply for CMA registration (pending key documents).
Early May	CMRE	Plan for your New Registrant Program: 1:1 Mentor and Midwifery Practice request to CMA. Build your AHS PMAO application.
Early June	CMRE results back Graduation Ceremonies	Gather up Birth Bag equipment and supplies. Negotiate with your CMA-approved midwifery practice including practice fees and mentor fees.
July	Appointments and Privileges happen	You can work!!

Typically, there is a sizable financial cost at this time as you move into the professional world. Being paid for the skills you learned as a student is not possible until the following criteria are met. You have:

- Graduated from MRU or another Canadian Midwifery Education Program in the same year you became registered with the CMA
- Liability Insurance
- A CMA Practice Permit
- Completed the AHS Midwifery Staff application
- An email from AHS PMAO confirming that you are able to start providing care at the Practice working in the clinic only.

New Registrants: Tips from ‘those who have gone before you’

The first four (4) months of the New Registrant Program can be challenging and somewhat overwhelming, and the realities of autonomous practice require adjustments.

- If you have not worked in the geographical area before, get acquainted with the hospitals and the local health care resources.
- Create a handbook of procedures, tips and protocols, details, passwords, etc.
- Seek out courses that will aid you in managing Primary Care and mitigate transfer of care needs, e.g. oxytocin management, epidural management courses.
- Build orientation time into your first months as a New Registrant. Examples include: hospital orientation, facilities, computer systems, community resources, buddy shifts, emergency skills training, drills on nursing units, etc.
- Form a peer support group with your New Registrant cohort – a group outside of your Midwifery Practice. This can create a psychological safety net. Access this group first, before you present at case review, or construct care plans, for example.
- Recognize your limits (mental and physical), ask for help to understand, ask questions, and rest when you can.
- Defer any actions related to becoming a full legal practice partner until after your New Registrant Program is complete.

Mentor Midwives: What's in it for Me?

Thank you for considering becoming a Mentor in the CMA New Registrant Program. CMA recognizes that being a mentor is a big commitment on your part in terms of your time and energy in launching a New Registrant into the world of Primary Care Provider.

Mentoring and facilitation of learning for new midwives is a big challenge, yet can also be rewarding. If you like teaching and helping others attain skills and experience, then this is the position for you!

Alberta has a small but mighty workforce of Registered Midwives, making it even more important that you consider mentoring New Registrants for the future, as we grow this profession and grow into the Primary Care Provider role within the health care system. Alberta families need competent, ethical, professional Registered Midwives now and into the future. You can play an important, integral role.

Here are some advantages to consider as you think about the Mentor Midwife role.

- Teaching and helping New Registrants keeps your knowledge levels high

- You can be proud knowing that you are influential in launching new midwives into the Alberta workforce, and possibly a future independent registered midwife contractor at your practice.
- Mentors will gain valuable activities for continuing competence requirements for the CMA, for registration renewal every year.
- Your practice will gain new staff, in the short term and possibly for the future
- New Registrants bring practice fees to help support the business portion of the Midwifery Practice, and negotiate fair mentor fee arrangements (may be arranged through the practice or between yourself and the New Registrant).

Information for Mentors

Mentors work 1:1 with one New Registrant for the duration of the New Registrant Program. One mentor cannot have two New Registrants at the same time.

In a recent poll of New Registrants, the following information was expressed, related to the role of the Mentor Midwife.

Great mentors:

- Help build resilience in the New Registrant from the beginning, e.g. build in debriefing time and share your experience with managing stress.
- View the New Registrant as an intern worthy of your time, attention and facilitation of their learning.
- Are able to form a positive working relationship with a New Registrant.
- Are ones who encourage the New Registrant to call if they are unsure and need to talk things through.
- Are willing to provide support to New Registrants in the form of being a sounding board.
- Create a stable work environment, e.g. by setting up routines and protocols.

In the New Registrant Program, there is an evaluation component for Mentor Midwives built into the program requirements. CMA will request your assessment and evaluation of key activities and situations that the New Registrant will experience, and comment on specific goals that the New Registrant is required to achieve.

For your support and resources, there is a New Registrant Program Completion Form (see Appendices) that you will be asked to complete along with the New Registrant, and there are plenty of CMA website resources for you: CMA Standards of Practice, Code of Ethics, and Alberta Competencies for Midwives.

Information for Midwifery Practices

New Registrants bring a number of positive aspects to your group:

- Fresh energy
- Additional financial base with New Registrant Practice fees
- Shared workload
- Future potential independent contractors to the team

Please arrange a fair practice fee amount for the New Registrant, and arrange a fair mentor fee for the New Registrant (may be arranged through the practice or negotiated between the Mentor and the New Registrant). Mentor fees may enhance a vested interest in the New Registrant and the New Registrant Program.

Communication and Conflicts

From time-to-time New Registrant/mentor/practice situations do not work. Address conflict situations with the New Registrant or the Midwifery Practice in the following way:

- a) refer to the CMA Standards of Practice related to dealing with the immediate relationship issue directly,
- b) contact the CMA Registrar if a solution to the conflict cannot be reached, to review options for arranging the remainder of the New Registrant Program, for both the New Registrant and their clients registrar@albertamidwives.org

If there is eventually a change in either Mentor Midwife or Midwifery Practice for the New Registrant, firstly, clients of the New Registrant must be given a fair, informed and transparent choice about their subsequent care provider and Midwifery Practice coverage.

Clients will most likely follow the New Registrant in the spirit of continuity of care, unless the client(s) make an informed choice differently. Protection of client health information must occur in all steps of the client transition process. Any remaining clients who do not

follow the New Registrant must be given a solid acceptable plan for adequate midwifery care coverage.

Other Organizations to Assist New Registrants

1) Alberta Association of Midwives (AAM):

- Provides Liability Insurance to Registered Midwives in Alberta
- Can assist in:

Interview skills for potential mentor midwives and midwifery practices

Determining if the Midwifery Practice and New Registrant are a “good fit”

Midwifery Practice contract interpretation (practice fees, Mentor fees, back up fees, admin support), as there are varying charges

Conflict resolution and dissolution steps/principles

Contact information: 1 (888) 316-5457 or alberta-midwives.ca

AAM staff will be meeting with you to provide detailed information.

2) AHS Provincial Midwifery Administration Office (PMAO):

Contact Information: midwives@ahs.ca

(403) 943-1808

Feel free to reach out with any questions or clarification. AHS will also be meeting with you to provide detailed information.

AHS supports Mount Royal University Midwifery graduate New Registrants as a priority in meeting the CMA general registration requirements, and supports the growth of midwifery services in Alberta, keeping in line with the Midwifery Workforce Plan and AHS provincial planning.

The PMAO is a team within AHS that provides clinical and administrative support for Registered Midwives that are members of the AHS Midwifery Staff.

Clinical support includes the granting of AHS Midwifery Staff Appointments and Clinical Privileges, access and orientation, point of care support, collaborative support, professional development and quality and safety activities.

Administrative support includes funding management (fund and pay midwifery services and liability insurance less \$1000 per midwife), AHS Midwifery Staff Bylaws and Rules, Midwifery Practice contract management, AHS committee leadership and membership, partnerships, engagement and strategic planning.

CMA Role

Approval and Matching Process

Criteria:

Safety of clients and upholding the public trust and confidence in Midwives and Midwifery is the CMA mandate.

Additional criteria is contained in Part B (Mentor Midwife Portion of the New Registrant Program Application Form), and Part C (Midwifery Practice Portion of the New Registrant Program Application Form).

CMA Registrar/Registration Committee will review the following:

1. The proposed New Registrant situation and relationship to allow opportunity to achieve all entry to practice skills, including Restricted Activities.
2. The Midwifery Practice is one that meets the criteria for an Established Practice (see definition section of the New Registrant Policy).
3. There is a reasonable number of New Registrants potentially drawing from the same client pool in any particular geographical area
4. Maintaining a continuous 1:1 ratio of New Registrant to Mentor Midwife within any given Midwifery Practice.
5. Level of historical support for a New Registrant, with midwives and with a midwifery practice
6. Graduation status of the New Registrant, new graduate
7. Other criteria as determined by the CMA Registrar and/or the Registration Committee.

New Registrant Program Requirements

This section is an overview of the requirements to complete during the New Registrant Program. For more specific details, please find the Checklist of New Registrant Program Requirements in the Appendices. The requirements are in three categories:

Legislated Requirements

The New Registrant must:

- 1) be under the supervision of a CMA approved 'supervisor' – i.e. 1:1 Mentor Midwife
- 2) monthly Chart Reviews must be conducted

Practice Requirements set by CMA Council

Every year CMA Council will approve a key set of practice requirements for New Registrants to complete during their Program. The key set of requirements is derived from information and collaboration with the CMA Registration Committee, the Competence Committee, Mount Royal BMid Program communication, and other sources. NOTE: A set of definitions related to birth numbers and New Registrants are contained at the beginning of the New Registrant Policy. You will need to refer to them for accuracy in reporting your birth numbers.

Current Council Requirements

- 1) Work on a 1:1 basis with the CMA-approved Mentor Midwife (or approved Alternate Mentor Midwives if the Mentor is on vacation) within a CMA-approved Midwifery Practice for a period of at least twelve (12) months.
- 2) Keep Informed Decision-making and client choice at the forefront of all client interactions.
- 3) Complete a minimum of 30 births as the Primary Midwife (Primary Births) with Continuity of Care and 20 births as the Second Midwife.
- 4) Complete a minimum of five (5) births in both In-hospital and Community birth situations, as either Primary Midwife or Second Midwife. This will be included in the above total of 50 births.
- 5) For the duration of your New Registrant Program, for Community Births, make every effort to have a General Registrant Midwife who has completed at least one year of practice in Alberta serve as Second Midwife.
- 6) Be a Primary Midwife for In-hospital births and make every effort for the duration of your New Registrant Program to have a General Registrant Midwife who has completed at least one year of practice in Alberta to serve as Second Midwife. Alternately, a New Registrant can be Primary Midwife with any qualified Second Birth Attendant (see CMA Second Birth Attendant on the CMA website). This means another Registered Midwife, a Registered Nurse, or another New Registrant.

Additional Council Requirements

Please refer to the [Checklist of New Registrant Program Requirements](#) in the Appendix 4 for the additional requirements for this year.

Individual Experiences/ Activities Needed/Areas to Grow Into

NOTE: CMA will be meeting and working with you on setting out the following categories.

1) Outcomes of the individual CMA-identified Restricted Activities Survey:

Upon receiving your initial CMA Registration, you will be given a Survey to complete and submit to the CMA. The items on the survey are entry to practice competencies and activities. Some of them you may not have run into in your education and clinical experiences. NOTE: Please add these areas to your checklist in STEP 3: New Registrant Requirements and let your 1:1 Mentor know that you are eager to learn them as goal experiences for your New Registrant Program.

2) Individual Graduation-related birth numbers/experiences:

From time to time, despite great planning, the requisite birth numbers and experiences do not happen during the BMid Program timeframe. The CMA and faculty from the BMid Program will have communicated about these matters. This area can be addressed and completed during the New Registrant Program. Areas may include: birth numbers, hospital experience, community birth experience or other identified areas.

Starting Work as a New Registrant

No doubt, the transition from your 4th Year Practicum to your New Registrant Program will bring some adjustments and changes. For some, it represents a physical move to a different location. For others, it is simply an extension of their 4th year practicum situations.

No matter what, there will be differences, as you start gathering and buying your equipment and supplies and enter into the world of being paid and having Midwifery Practice expenses and gathering your own clients to manage care for.

Be sure to have a signed contract in place with the Midwifery Practice. CMA strongly recommends that your mentor receive fair reimbursement for their role, time and responsibilities. You would negotiate this contract arrangement with your Mentor or your Midwifery Practice lead.

Remember to keep your checklist for your New Registrant Program Requirements handy, as you move into your new role.

CMA will be eager to see how things are going as you move through your New Registrant Program. A CMA representative will request a time frame for at least two status interviews during your Program. In addition, you are always welcome to contact CMA to share how things are going.

New Registrant Program Completion

Fast forward to at least 12 months in the future, as you near the end of your New Registrant Program and the completion of your requirements.

As part of this Package, you will also find a New Registrant Program Completion Form that both you and your Mentor Midwife will need to complete and submit to CMA (Appendix 5).

Submission of this form will trigger a series of events that will move you to the General Registrant Full Practice Permit category.

Congratulations!

APPENDIX 1, STEP 1: Initial Registration checklist

CHECKLIST FOR REGISTRATION

New Graduate - Canadian Midwifery Education Program

As a recent graduate from an approved midwifery education program in Canada, who has not yet registered as a Registered Midwife and would like to apply for registration with the College of Midwives of Alberta (CMA), you must:

NR Application Forms

Submit completed NR forms (pages 30-35 of the NR Handbook). These forms can be sent in the beginning of your application before all other documentation since it goes to the Registrar for approval and assistance with the matching process between the new registrant, the mentor and the practice. Please send it to admin@albertamidwives.org

Application for Registration

Provide a completed application, dated and signed and create your CMA profile – [Application for Registration](#)
* If you are a student registered with the CMA, you do not need to start a new application, please request a change of status through your CMA profile.

On your application, please provide a current photo with a plain background that will be used for your practice permit card. The photo must be a clear and coloured headshot, similar to your passport photo.

Non-Refundable Application Fee

Submit payment of the \$300 CAD non-refundable application fee to the CMA (invoice available at the end of the online application above).

*If you are already a student registered with the CMA, you should only pay the \$25 CAD fee for a change of status through your CMA profile.

Interac e-transfer can be made to info@albertamidwives.org or contact the same email address for alternate payment options.

Restricted Activity Survey

Complete the Restricted Activity Survey available through your CMA profile >"view documents"> "additional"> "restricted activities self assessment survey". This survey should be sent along with the NR Application Forms mentioned above to assist with the matching process.

Identification

Upload in your profile a clear copy of a government issued identification that matches your full legal name on the application form. The identification must include your photograph and signature. For example, a passport or a driver's license.

Name Change

Upload in your profile a copy of documentation to support your name change if your name on any document submitted is different than your full name on the application. For example, a marriage certificate or legal name change document.

Citizenship, Residency or Employment Authorization

Submit copy of: Canadian passport, Canadian birth certificate, permanent resident card or valid work permit.

Education

Upload official transcripts and certificate/diploma/degree from your midwifery program. The CMA will accept a letter directly from your Midwifery Education Program to confirm you have completed the program and are eligible for registration (must be sent directly from your program to the CMA).

CMRE

Successfully complete the [Canadian Midwifery Registration Exam \(CMRE\)](#) and upload evidence in your profile.

Criminal Record Check

Upload in your profile a Police Information Check with a Vulnerable Sector Check through your local police service in Canada conducted within 6 months prior to the submission date of your complete application.

Letter of Standing and Professional Conduct

Provide a Letter of Standing and Professional Conduct from each jurisdiction where you were or are registered as a regulated professional (for example, midwife, nurse, physician). This letter is valid for 6 months and if you do not complete your registration in 6 months you will be required to provide a new one (must be sent directly from the regulatory body to admin@albertamidwives.org .

Character and Reputation

Provide 2 character references from an employer, educational institution or, where applicable, colleagues. Please send it to admin@albertamidwives.org

Declaration for Registration

Complete the Declaration for Registration form available through your CMA profile >"view documents" > "additional" > "Declaration for Registration".

Trauma Informed Module

Complete the Sexual Abuse and Sexual Misconduct Module: "Protecting Patients from Sexual Abuse and Misconduct" - <http://afrhp.org/bill21-protecting-patients/> Once completed, please save your certificate and upload it into your CMA profile.

Jurisprudence Exam

The Jurisprudence exam is currently suspended as it goes through a review and update.

Mandatory Competencies

Provide evidence of successfully completing the mandatory competencies: Cardiopulmonary Resuscitation – CPR (valid for 2 years); Fetal Health Surveillance (includes 3 cm tracing and is valid for 2 years); Emergency Skills (valid for 2 years) or equivalent; Neonatal Resuscitation (includes E-tube intubation and is valid for 1 year). These courses must be retaken prior to their expiration and current certificates must be uploaded in your profile. Please see the [Continuing Competence Program Policy](#) for more information.

English Language

Provide proof of current English language test If English is not your first language or if you have not completed your midwifery education in English.

IELTS – Academic 7.0 Overall (minimum 7.0/component)

TOEFL – Internet-based 95 total (25 min. speaking and 21 min. other components)

Liability Insurance

Provide evidence of professional liability insurance and upload a copy of your Certificate of insurance in your profile. Please contact [Alberta Association of Midwives](#) for more information. **Important:** You will be able to apply for insurance only once all the above requirements are completed and CMA has issued your registration number.

Practice Permit Fees

Submit payment of Practice Permit Fee: \$4550 for the entire year, but fees will be adjusted according to the month you begin practice. Please contact info@albertamidwives.org for payment arrangements.

Additional Information

- **AHS Privileges** - Midwifery services are publicly funded through Alberta Health Services. We recommend that if you are applying for any midwifery position you contact Alberta Health Services to understand the privileging and appointment process and to ensure the position is funded - midwives@AHS.ca
- Read the CMA [P24 New Registrants \(New Graduates\) Handbook](#) to learn about your New Registrants requirements and for forms.
- Complete applications may take up to 5 business days to be processed.
- The Registrar or the Registration Committee may request additional information in accordance with the *Health Professions Act*, the *Midwives Regulations*, and the CMA Bylaws.
- Coordination of the application process is important to ensure a document does not expire before all required documents are received and approved. **Please confirm with Alberta Health Services regarding their process so you can coordinate similar requirements (for example: criminal record check).**
- Additional questions may be directed by email to admin@albertamidwives.org

APPENDIX 2, New Registrant (New Graduate) Policy CAM Canadian Midwifery Model of Care Position Statement

2023 New Registrant (New Graduate) Policy

Policy Name	New Registrant (New Graduates) Policy	Number	24
Date Approved by Council February 11, 2021 March 23, 2023		Date of Review March 23, 2023	
<p>PURPOSE: In accordance with the Midwives Profession Regulation, the College of Midwives of Alberta (CMA) Standards of Practice and Competence, Code of Ethics, and the New Registrant Program, the New Registrant Policy is designed to ensure that New Registrants receive midwifery full scope of practice support and experience that will benefit them in entering the profession of midwifery in Alberta. In addition, it will ensure the safest possible care to the clients served during the period when New Registrants are becoming integrated into the health care system.</p> <p>The Midwives Profession Regulation (April 1, 2019), Conditions of Practice states:</p> <p><i>5 (1): During the first year that a regulated member is registered on the general register, the regulated member must:</i></p> <ul style="list-style-type: none"> <i>a) work within a midwifery practice</i> <i>b) have a supervisor who has been approved to serve by the Registrar or Registration Committee</i> <i>c) participate in monthly chart reviews with a regulated member who is registered on the general register, and who has been registered on the general register for at least one year.</i> <p><i>(2) In the regulated member's first year, the regulated member must meet any practice requirements set by Council.</i></p> <p>Entry level Midwives require time and support from employers, mentors and the health care team to consolidate their knowledge, skills and judgement, develop their individual approach to delivery of midwifery care, and establish professional relationships. As they develop confidence in their clinical midwifery role, they integrate and further build their leadership, research and clinical skills that are critical to midwifery practice. In short, they become adept at the Primary Care Midwifery Provider role.</p> <p>The New Registrant Program (of which the New Registrant Policy is one component), is designed for a 1:1, 24/7 pairing of New Registrant to CMA-approved Mentor Midwife. The support that can be provided in both clinical and interprofessional situations will be a valuable asset to all newly practicing midwives. The New Registrant Program encompasses at least one year (12 months) AND completion of key requirements.</p> <p>The CMA recognizes that this policy will effectively delay some New Registrants from setting up new practices in previously unserved areas of the province. However, Registered Midwives who move into under serviced areas following the New Registrant Program will be in a stronger position as a result of that experience.</p> <p>This policy applies to all new graduates in their first twelve (12) months of practice in Alberta. If New Registrants from other Canadian jurisdictions have less than 12 months of midwifery experience upon arrival in Alberta, the New Registrant Policy will apply. This policy is followed</p>			

once new graduates have successfully completed all of the requirements for initial registration in Alberta. Please see the CMA Registration Policy # 6 for details on initial registration. Section 6 (3) of the *Midwives Profession Regulation (April 2019)* provides direction related to the Canadian Midwifery Registrations Exam (CMRE), and possible change of the New Registrant to the Provisional Register.

If the CMRE is delayed or cancelled for any reason (due to unforeseen circumstances on the part of the Exam administrator – CMRC), all New Registrants will be placed on a Provisional Register, with the condition of successful completion of the CMRE when it is next offered.

a) Provisional Registration can mean in some circumstances a condition of more **direct** in-person mentoring, as opposed to having the Mentor Midwife being available by phone at all times. This would then become a consideration for the situation where a New Registrant is unsuccessful in passing the CMRE. CMRE candidates have three attempts to successfully pass the exam, with each unsuccessful attempt requiring consideration of placing the New Registrant on the Provisional Register with more direct mentoring.

b) In addition, a registration on the provisional register category of the regulated members register expires:

- 1) 2 years after the registration is made, or
- 2) immediately on the regulated member's 3rd unsuccessful attempt to pass the CMRE (*Midwives Profession Regulation, s. 6 (3), April 2019*).

Conflict Situations

From time to time, New Registrant/mentor/practice situations may not work. Conflict situations must be addressed with the Mentor Midwife or Alternate Mentor Midwife, or the Midwifery Practice in the following way:

a) refer to the CMA Standards of Practice to deal with the immediate relationship issue directly;

b) contact the CMA Registrar if a solution to the conflict cannot be reached, to review options for arranging the remainder of the New Registrant Program;

c) any changes to client care providers (either within the Midwifery Practice or moving to another Midwifery Practice) must firstly include client management of a fair, transparent nature, where clients are given informed choice about their subsequent care provider. In keeping with client choice and continuity of care, the clients will likely follow the New Registrant unless they make an informed choice differently. Protection of client health information must occur in all steps of any client transition process;

d) any remaining clients who do not follow the New Registrant must be given a solid, acceptable plan of care for fair, appropriate, adequate midwifery care coverage.

DEFINITIONS:

Alternate Mentor Midwife/ves: an additional named and CMA-approved Midwife, who acts as the Mentor Midwife when that Mentor Midwife is unable to fulfill the Mentor Midwife duties for any specified length of time.

Code of Ethics: ethical principles that govern decisions, behaviour and practice.

Chart Review: a review of current cases on the New Registrant's caseload, and at a minimum should include review of all postpartum clients, clients of 30 weeks gestation or later, and clients with specific concerns. Areas of focus may include: documentation consistency, accuracy, informed decision-making conversations and decisions documented, client management, storage of client health information, adherence to CMA policy-related topics and clinical practice guidelines, etc.

Community Birth: birth that occurs outside of the hospital. This includes, but is not limited to birth that occurs in birth centers, birth suites, and other out of hospital locations.

Competence: the integrated specific knowledge, skills, ability and judgement required to practice safely and ethically in a designated role and setting.

Continuity of Care: a philosophy and a process that facilitates the perception by the client of continuous midwifery support with the goal of building understanding, support and trust. Midwifery care is provided throughout pregnancy, labour, and postpartum.

Entry Level Midwife: when a midwife is at the point of initial registration, following graduation from an approved Canadian midwifery education program or bridging program.

Established Practice: a Midwifery Practice that meets all of the following requirements:

- has at least one General Registered Midwife who is publicly funded and has been actively practicing for at least one year in Alberta
- has at least one General Registered Midwife who has practiced in the community and has privileges for at least one year at a hospital with 24/7 obstetrical care within that same community
- provision of care consistent with the full scope practice of Alberta Registered Midwives, including continuity of care and choice of birthplace as described in the *Canadian Midwifery Model of Care (see Appendix)*
- enough capacity to support a New Registrant with mentor(s) on a 1:1, 24/7 basis, and accommodate New Registrant clients equal to full time practice

General Registrant Midwife: for the purpose of this program, a midwife on the CMA register who has been actively practicing in Alberta for at least 12 months and has no conditions on their Practice Permit.

In Good Standing: the status assigned to a member of the College of Midwives of Alberta when they:

- 1) Fulfill all the requirements of registration: current registration, and any CMA fees have been paid
- 2) Practice in accordance with the *Midwives Profession Regulation*, Code of Ethics, Standards of Practice and Competence
- 3) Have no suspensions or current disciplinary judgements imposed on their registration

4) Have not had their registration cancelled by the CMA.

Immediate Postpartum: includes the time from the birth of the baby to a point of stabilization of the client and baby when no further care and/or support from the second birth attendant is required, as determined by the Primary Midwife. Usually, 2-4 hours post birth.

Intrapartum: the time period spanning childbirth, from the onset of labor through delivery of the placenta.

Mentor Midwife: a named General Registrant Midwife, who has practiced as a General Registrant with full Practice Permit for at least one year, is in good standing with the CMA, and is approved by the CMA for this role. This midwife is the main person who provides support to the New Registrant during the New Registrant Program period.

Midwifery Practice: one or more midwives who work together, using a financial structure, to deliver midwifery services to a group of clients. The business entity with which the New Registrant has a formal contract agreement for the duration of the New Registrant Program.

Most Responsible Provider (MRP): The Registered Midwife or other Primary Care Provider who holds overall responsibility for leading and coordinating the delivery and organization of the clients care at a specific moment in time.

NOTE: There can only be one designated MRP at any given point in time. This role can be discussed, adjusted, and agreed upon by all parties involved, when transfer of care is anticipated/occurs.

New Registrant: a graduate midwife who is in their first year of practice in Alberta, and who is planning to complete the CMA New Registrant Program.

Primary Birth: when the Primary Care Midwife Provider is the Most Responsible Provider for a client during the intrapartum period. The Primary Care Midwife Provider attends and manages the client during labour, birth and the immediate postpartum period.

NOTE: a planned Cesarean Section would not count here, but could count as a Continuity of Care.

Primary Birth when Transfer of Care occurs:

- 1) If the initial Primary Care Midwife Provider leaves a client during the intrapartum period (due to illness, no longer safe to work/too tired, family emergency, etc.) prior to the birth, the receiving Primary Care Midwife Provider to whom the care is transferred assumes the role as the Most Responsible Provider and can count the birth as a primary birth. The receiving Primary Care Midwife Provider must however, manage and attend the labour, birth and immediate postpartum period.
- 2) If a transfer of care occurs to an Obstetrician antenatally/prior to the onset of labour and the Primary Care Midwife Provider is not in the role of the Most Responsible Provider during the labour, birth and the immediate postpartum period, it CANNOT be counted as a primary birth toward CMA primary birth numbers. This situation could still be counted as a Continuity of Care.
- 3) If a transfer of care to an Obstetrician occurs during the intrapartum period (i.e., emergent caesarean section, instrumental delivery, or high-risk obstetrical complication, etc.), the Primary Care Midwife Provider can count up to 20% of intrapartum transfers of care toward the CMA primary birth requirements when the

Primary Care Midwife Provider maintains intrapartum care in a supportive role, attends the birth and takes over care again in the immediate postpartum.

Primary Care Midwife Provider/Primary Midwife: a regulated health professional who is the initial access point to the health care system. They can provide first contact maternity services and coordination to ensure continuity, if specialized care is required.

Second Birth Attendant: an individual, other than a Registered Midwife with the CMA, who works with a Registered Midwife to provide care during labor, birth and the immediate postpartum period, but not in subsequent visits. This person is a member of a regulated professional college.

Second Midwife: a Registered Midwife with a valid practice permit from the CMA, who provides collaboration and support to the Primary Midwife for the client labour, birth and immediate postpartum period.

Scope of Practice: the activities that the health care provider is authorized to perform, as set out in the legislation and described by standards of practice, limits and conditions set by regulators.

Standards of Practice: an authoritative statement that describes the required behaviour of every Registered Midwife and is used to evaluate individual performance.

Transfer of Care: the transfer of responsibility from one Most Responsible Provider to another, for some, or all of the duration of the client's care.

NEW REGISTRANTS ARE EXPECTED TO:

Note: Please refer to the Appendices for The New Registrant Program Handbook for process steps and expectations for New Registrants.

Keep Informed decision-making and client choice at the forefront of all client interactions. Research potential Mentor Midwives and Midwifery Practices adequately for “good fit” before signing any contract agreements.

Start work and/or volunteering at a Midwifery Practice only when the following conditions are met:

- a) written confirmation from the CMA of a complete initial registration,
- b) a Practice Permit has been issued by CMA, and a confirmation that the RM protected title or designation has been conferred to the New Registrant,
- c) possess liability insurance through Alberta Association of Midwives (AAM),
- d) confirmation that AHS Appointments and Clinical Privileges have been granted
- e) complete and sign a Midwifery Practice Contract before starting work in the Midwifery Practice

With the Mentor Midwife, create and complete an orientation related to the Midwifery Practice and to the relevant hospital(s) and community resources.

Participate in an interview with a CMA representative during the New Registrant Program to enable the CMA to gain an understanding of what aspects of the Program are working and which aspects could improve.

Accomplish all aspects of the New Registrant Program Completion Requirements. Upon completion of all of the New Registrant Program requirements AND completion of one year (12 months) in the New Registrant program:

- a) provide the CMA with a completed New Registrant Program Completion Form,
- b) provide any other required documents to the CMA.

NEW REGISTRANT PROGRAM COMPLETION REQUIREMENTS:

There are three areas of requirements:

Legislated Requirements

- 1) Participate in monthly chart reviews with a regulated member who is registered on the general register, and who has been registered on the general register for at least one year.
- 2) Work within a midwifery practice and have supervisor who has been approved to serve by the Registrar or Registration Committee.

Practice Requirements set by the CMA Council

In addition to the policy statements below, the CMA Council will approve yearly, a key set of practice requirements for new registrants to complete. The key set of requirements is derived from information and collaboration from the CMA Registration Committee, the Competence Committee, Mount Royal BMid Program communication, and other sources deemed important.

Currently, the list of requirements is below. The New Registrant is referred to the New Registrant Handbook and the Checklist for New Registrant Program Completion Requirements for any additional requirements from the CMA Council.

- 1) Complete a minimum of 30 births as the Primary Midwife (Primary Births) with Continuity of Care and 20 births as the Second Midwife.
- 2) Complete a minimum of five (5) births in both In-hospital and Community birth situations, as either Primary Midwife or Second Midwife. This will be included in the above total of 50 births.
- 3) Work on a 1:1 basis with the CMA-approved Mentor Midwife (or approved Alternate Mentor Midwives) within a CMA-Approved Midwifery Practice for a period of at least twelve (12) months.

For the duration of the New Registrant Program, for Community Births, make every effort to have a General Registrant Midwife who has completed at least one year of practice in Alberta serve as Second Midwife.

Be a Primary Midwife for In-hospital births, and make every effort for the duration of the New Registrant Program to have a General Registrant Midwife who has completed at least one year of practice in Alberta to serve as Second Midwife. Alternately, a New Registrant in the Primary Midwife role will have a qualified Second Birth Attendant (see CMA P13a Second Birth Attendant Policy). This means another RM, a Registered Nurse, or another New Registrant.

Individual Needs for Experience/Areas to Grow

These requirements are determined after the New Registrant and the CMA and sometimes the Mount Royal BMid program confer. This discussion and individual plan will take place around graduation time and before the New Registrant begins work.

Please see the New Registrant handbook for more details in this area.

MENTOR MIDWIVES ARE EXPECTED TO:

Note: Please refer to the New Registrant Handbook for a detailed checklist of process steps and expectations for Mentor Midwives.

Work on a 1:1 basis with ONE New Registrant for at least one year (12 months). There will be a 1:1 Ratio of New Registrants to approved Mentor Midwives within any given Midwifery Practice.

Keep Informed Decision-making and client choice at the forefront of all client interactions.

Complete and sign the Mentor Midwife portion of the New Registrant Program Application Form and send it electronically to the CMA.

Form a positive relationship with the New Registrant; be willing to be a sounding board and provide emotional support at times.

In the first month that the New Registrant starts work, support the orientation and mentorship of the New Registrant to the Midwifery Practice, hospital and community environments.

Orientation and mentorship typically includes:

- a) orientation to Midwifery Practice protocols and community resources
- b) orientation to hospital systems, policies and staff (documentation, other professions on call, computer systems, buddy shifts, emergency skills training, drills on units, etc.)
- c) orientation to conducting Community Birth as a Primary Midwife (equipment, supplies, communication with EMS, other planning components)

Assist the New Registrant to complete their Checklist of New Registrant Program Requirements (see requirements section later in this policy).

Facilitate learning opportunities and advise the New Registrant on appropriate resources.

Give advice for clinical situations, and give objective feedback.

Provide a positive environment and relations with the New Registrant.

Be available to the New Registrant in person or by phone 24/7 for support and advice. In the event that the CMA approved Mentor Midwife is unavailable (vacation or days off), the New Registrant and Mentor Midwife **will designate and communicate to CMA** the name of an Alternate Mentor Midwife to be available to the New Registrant during that time.

Work to ensure that the New Registrant has consistent opportunity to act as Primary Midwife in both hospital and community birth situations during their New Registrant Program.

Be willing to be called as Second Midwife for your New Registrant.

Assist the New Registrant to participate in monthly Chart Reviews (see definition above).

Participate in an interview with a CMA representative during the New Registrant Program to enable the CMA to gain an understanding of what aspects of the Program are working and which aspects could improve.

Provide reasonable off-call time and holidays for the New Registrant during the New Registrant Program period.

Sign off on the New Registrant Program Completion Form at the conclusion of the New Registrant Program.

Be aware that if the New Registrant does not successfully pass the CMRE (initially or on their second and third attempts), you may be required to ensure that the New Registrant has direct in-person mentoring, depending on the conditions on their practice permit. The CMA would inform you at the time of any changes.

All Mentor Midwives are directed to review the Mentor Midwife Section of the New Registrant Program Handbook: [What's in it for me?](#)

MIDWIFERY PRACTICES ARE EXPECTED TO:

Complete and sign the Midwifery Practice portion of the New Registrant Program Application form and send it electronically to the CMA at: admin@albertamidwives.org

Complete and sign the New Registrant contract agreement prior to the New Registrant starting work.

In the first month that the New Registrant starts work, support the orientation and mentorship of the New Registrant to the Midwifery Practice and hospital environments.

Keep your Midwifery Practice policies and procedures up to date for orientation.

Give the New Registrant reasonable off-call time and holidays.

Provide adequate, consistent and helpful administrative support.

Assist the New Registrant and the Mentor Midwife to complete the Checklist of the New Registrant Program Completion Requirements (see the New Registrant Handbook).

Assist the New Registrant to participate in monthly Chart Reviews (see definition above).

Be aware that if the New Registrant does not successfully pass the CMRE (initially or on their second and third attempts), you may be required to ensure that the New Registrant has direct in-person mentoring, depending on the conditions on their practice permit. CMA would inform you at the time of any changes.

ROLE OF THE CMA IN THE NEW REGISTRANT PROGRAM

Follow and enact the legislative directives.

Provide each potential New Registrant with a New Registrant Program Handbook, containing all aspects of the New Registrant Program.

The CMA is responsible for the registration of new graduates and the approval of Mentor Midwives and subsequently, Midwifery Practices in Alberta who meet the criteria for mentorship.

The CMA Council will approve yearly, a key set of practice requirements for New Registrants to complete. The key set of requirements is derived from information and collaboration from the CMA Registration Committee, the Competence Committee, Mount Royal BMid Program communication, and other sources deemed important.

Manage the New Registrant/Mentor Midwife/Midwifery Practice approval and matching process, using the following criteria: application answers provided by the New Registrant, Mentor Midwife and Midwifery Practice Owner/Lead, level of past support for New Registrant, Mentor Midwife “in good standing” status, number of New Registrants per Midwifery Practice and/or geographical area, graduation status of the New Registrant, established practice status, and other criteria as deemed necessary by the Registration Committee and/or the Registrar.

Approve one New Registrant for one Mentor Midwife.

Communicate to both the New Registrant and the Mentor Midwife the expectations of each during the New Registrant Program timeframe.

Conduct an interview with both the New Registrant and the Mentor Midwife to learn what aspects of the program are working and which aspects need further consideration.

Facilitate positive working relations between the New Registrant and the Mentor Midwife and review and follow through on options if the relationship is not working out, ALWAYS keeping client trust, safety and privacy as priority.

The Registration Committee will receive the New Registrant Program Completion forms. They then conduct a review of the Checklist of New Registrant Program Completion Requirements and the New Registrant Completion Form and recommend next steps to the Registrar.

The Registrar will review the recommendations of the Registration Committee and act upon them. Options include:

- Move the New Registrant to the general register with full Practice Permit
- Require completion of documentation on the forms sent to the CMA
- Direct the New Registrant to complete additional requirements

REFERENCES:

Canadian Model of Midwifery Care (September 2015)

Canadian Association of Midwives (CAM) website: <https://canadianmidwives.org/position-statements/>

CMA Policy # 6 Registration Policy

CMA Policy #13a Second Birth Attendant Policy

Midwives Professional Regulation (April 2019), Alberta Health

APPENDIX:

Canadian Model of Midwifery Care (CAM) - <https://canadianmidwives.org/>

New Registrant Handbook (2021)



POSITION STATEMENT

THE CANADIAN MIDWIFERY MODEL OF CARE POSITION STATEMENT

Purpose

The purpose of this statement is to articulate the essential principles of the Canadian midwifery model of care, which has achieved worldwide recognition and admiration. This statement is meant to serve as a reference for the public, midwives, policy makers, government, health professionals, and educators, as well as those engaged in research, education, regulation, collaboration, and professional development.

Background

Historically, Aboriginal midwives have held a distinct traditional role within Indigenous, First Nations, Inuit and Métis communities, which included all aspects of the health of women and their families throughout the lifecycle. A grass roots movement, born out of social activism and the struggle for women's rights, resulted in the development of a parallel midwifery practice in Canada. Together, these two foundations, alongside research, evidence-based guidelines and clinical practice have helped to develop and solidify the current Canadian midwifery model of care.

Context

CAM recognizes that pregnant individuals, supporting partners and co-parents, as well as the midwives who provide their care, may self-identify as female, male, two-spirit, transgender or otherwise. In this statement, the words used to describe midwifery clients were carefully selected to honour and acknowledge both the roots of midwifery in the women's rights movement as well as the diversity of midwives and clients in their care.

The Seven Core Principles of the Canadian Midwifery Model of Care

The delivery of midwifery care is flexible and aims to meet the diverse needs of families and communities across Canada. Within this flexible framework are seven essential principles which form the core of Canadian midwifery care:

Professional Autonomy

Canadian midwives are autonomous primary health care providers, who provide comprehensive care during pregnancy, labour, postpartum and the newborn period. Midwifery in Canada is a direct entry profession and is self-regulated. Midwifery services are publicly funded and integrated within the Canadian healthcare system. Midwives work in home, hospital and community settings, including maternity centres and birth centres. Midwives access emergency services as needed. Where available, midwives maintain hospital privileges for the admission of clients and their newborns.

Partnership

Midwives engage in a non-authoritarian and supportive partnership with clients throughout their care. Midwifery recognizes the intimate client-care provider relationship as being integral to the provision of care that is responsive to the unique cultural values, beliefs, needs and life experiences of each client. Research suggests that the nature of the relationship between a client and healthcare provider is one of the most significant determinants of positive outcomes. For Aboriginal communities, the inclusion of extended families and the integration of culturally safe care increases positive health outcomes. Midwifery has grown from and continues to be driven by the voices of women and all people experiencing midwifery care.

Continuity of Care-Provider

Midwifery provides continuity of care-provider, whereby a known midwife or small group of midwives, provides care throughout pregnancy, labour and the postpartum period. Sufficient time is offered during routine visits for meaningful discussion and ongoing health assessment. This approach creates the opportunity for building a relationship of familiarity and trust, and facilitates informed choice discussions. The presence of a known and trusted caregiver during the birth experience enhances client safety and satisfaction, and is an aspect of midwifery care that is highly valued. Continuity of care-provider results in excellent health outcomes, increased client satisfaction and cost effective care.

Informed Choice

Midwives recognize the right of each person to be the primary decision maker about their care. Midwives encourage and enable clients to participate fully in the planning of their own care and the care of their newborns. Informed choice requires cooperative dialogue and encourages shared responsibility between client and midwife or midwives. Midwives share their knowledge and experience, provide information about community standards, and offer evidence-based recommendations. Midwives encourage clients to actively seek information and ask questions throughout the process of decision-making. Midwives recognize and respect that clients will sometimes make choices for themselves and their families that differ from their midwife's recommendation and/or community standards. In such circumstances, midwives will continue to provide access to the best possible care.

Choice of Birth Place

Everyone has the right to choose where they will give birth, and midwives are responsible for providing care within their scope of practice to their clients in the setting of their choice. People may choose to give birth in their homes, hospitals, birth centres and health clinics safely with midwives in attendance. Midwives are an essential part of quality maternity care that supports people to give birth as close to home as possible in urban, rural and remote communities.

Evidence-based Practice

Midwives support physiologic birth. Midwifery practice is informed by research, evidence-based guidelines, clinical experience, and the unique values and needs of those in their care. Aboriginal communities value the traditional knowledge that has been passed down orally and experientially through generations of midwives and use this knowledge in practice for optimal birth outcomes.

Collaborative Care

Midwives are autonomous healthcare providers, working independently and in collaboration with other healthcare professionals as needed. Where it meets the unique needs of a specific community, population, or geographical area, midwives may work collaboratively within creative interdisciplinary models of practice. CAM supports collaborative care that is innovative and midwifery led. The principles of continuity, informed choice, partnership and choice of birthplace remain essential elements of midwifery care within a collaborative practice.

Conclusion

Excellent research evidence has demonstrated that midwifery in Canada offers optimal health outcomes and increased client satisfaction compared to other models of reproductive healthcare. The Canadian model of midwifery care is a highly valued paradigm of the profession globally. CAM believes that these principles of the Canadian model of midwifery care must be safeguarded as midwifery grows and evolves to meet the diverse needs of families, communities, and the midwives themselves. Midwifery services in Canada must be universally accessible to all people wherever they live, and adequate supports must be in place to ensure that the Canadian model of midwifery care can flourish. CAM supports the sustainability and growth of Aboriginal midwifery across Canada and access to midwifery care for all Aboriginal communities. The profession of midwifery, well-integrated and supported within existing health care services, is essential to improving reproductive and child health outcomes across Canada.

CAM/ACSF Position Statement: CANADIAN MIDWIFERY MODEL OF CARE
Adopted CAM/ACSF Board of Directors September 2015

APPENDIX 3, Step 2: New Registrant Application Form

Part 1: New Registrant Portion

Part 2: Mentor Portion

Part 3: Midwifery Practice Portion

Part 1: New Registrant Portion of the New Registrant Application Form

NOTE: When entering your information please click and then delete the fillable areas and proceed to enter your information. If you find that the form will not work electronically, please fill it by hand, scan it and send it to CMA admin@albertamidwives.org

This is the start of the CMA New Registrant/Mentor approval process.

New Registrant name: (First Name) (Last Name) **Date:** Click or tap to enter a date.

I have fully researched potential Mentor Midwives and Midwifery Practices for a “good fit” for my completion of my New Registrant Program. The requested Mentor Midwife and the Midwifery Practice are aware of my request. (Initials) (New Registrant initials)

Name of requested Midwifery Practice: (Type Name)

a) does this specific Midwifery Practice have a permanent position available through the AHS PMAO? yes no

b) your rationale for requesting this Midwifery Practice:

(Type here)

c) where have you done your 4th year practicum? (Name of Practice)

Requested 1:1 Mentor Midwife: 1st choice: (First Name) (Last Name)

2nd choice: (First Name) (Last Name)

Please ask your 1st choice Mentor Midwife to fill out the next page. It can be done electronically and sent to CMA.

Declaration:

I acknowledge and understand that I **can only** provide AHS funded care prior to having an AHS Staff Appointment and Clinical Privileges if:

I have graduated from MRU or another Canadian Midwifery Education Program in the same year I became registered with the CMA

I have Liability Insurance

I have a CMA Practice Permit

I have completed the AHS Midwifery Staff application

I have an email from AHS PMAO confirming that I am able to start providing care at the Practice working in the clinic only.

Date: _____ Initials: _____

Please complete, save this form and submit via email to admin@albertamidwives.org

Part 2: Mentor Midwife portion of the New Registrant Program

Application

NOTE: When entering your information please click and then delete the fillable areas and proceed to enter your information. If you find that the form will not work electronically, please fill it by hand, scan it and send it in to CMA admin@albertamidwives.org

Name of New Registrant (NR): (First Name) (Last Name)

Your Name: (First Name) (Last Name) **Date:** Click or tap to enter a date.

Name of Midwifery Practice you are with: (Enter Name)

Please check all that apply on the following list. If you need extra space to give more information, please use the space at the bottom of the form. YOU:

- Are CMA-registered and been actively practicing and AHS-funded for at least one year
- Are prepared to have only one New Registrant with you for a 1:1 relationship
- Are prepared to be a mentor for at least one year (12 months), (shortest duration of New Registrant Program)
- Have hospital privileges in your current practice at a hospital with 24/7 OB services

Name of Hospitals (Enter Hospital Names)

- Provide care consistent with the full scope of practice of AB RM's, with Continuity of Care and choice of birthplace as described in the *Canadian Model of Midwifery Care*
- Provide a stable working environment, eg. build in routines and protocols.
- Provide orientation for the New Registrant to your Midwifery Practice and in the hospital(s) where the NR will be operating, eg. practice computer systems, buddy shifts, service delivery, meds, supplies.
- Are prepared to provide 24/7 1:1 mentorship to a New Registrant and that New Registrant's full client load
- Have the ability to consistently offer the New Registrant both hospital and community primary Registered Midwife experiences
- Have the ability to offer the New Registrant as the Primary Registered Midwife, a range of interprofessional communication situations, including support for asking questions in a potentially negative environment
- Keep Informed Decision-making and client choice at the forefront of all client interactions
- Are willing to facilitate learning opportunities for the NR to help them achieve the requirements of the NR Program, including restricted activities identified on the New Registrant List

- Will support the New Registrant **condition** where you need to be readily available to the NR by phone or in the facility.
- Create an informal support for the New Registrant through mentoring and coaching
- Monitor the well-being of the New Registrant
- Are willing to take on some clients on behalf of the NR early so they can assume client care for July
- Be aware that the New Registrant must have the following in place before they can provide AHS funded care prior to having an AHS Staff Appointment and Clinical Privileges. They have:
 - Graduated from MRU or another Canadian Midwifery Education Program in the same year I became registered with the CMA
 - Liability Insurance
 - A CMA Practice Permit
 - Completed the AHS Midwifery Staff application
 - An email from AHS PMAO confirming that I am able to start providing care at the Practice working in the clinic only.

Comments:

Signature of Registered Midwife (typed names will not be accepted):

Today's Date:

Please send this form to CMA at: admin@albertamidwives.org. and allow two weeks for a CMA response.

Part 3: Midwifery Practice Portion of the New Registrant Application Form

NOTE: When entering your information please click and then delete the fillable areas and proceed to enter your information. If you find that the form will not work electronically, please fill it by hand, scan it and send it in to CMA admin@albertamidwives.org

New Registrant (NR): Date:

Your name (as Practice Owner/Lead):

Midwifery Practice name:

Please check all that apply on the following list. If you need extra space to give more information, please use the space at the bottom of the form.

In your Midwifery Practice YOU:

- Have at least one midwife who has been actively practicing and AHS-funded in Alberta for at least 1 year
- Create a stable work environment, eg. build in routines and protocols
- Have at least one registered midwife who has had hospital privileges for at least 12 months in a hospital with 24/7 OB services nearest to where the midwife is currently practicing

Name of hospital(s): Type Here

- Provide care consistent with the full scope of practice of AB Registered Midwives, including continuity of care and choice of birthplace as described in the Canadian Midwifery Model of Care ([LINK](#))
- Have enough practice capacity to support a New Registrant with aMentor on a 1:1 basis, who is available and prepared to provide 24/7 mentorship
- Have enough practice capacity to support a New Registrant with in-care clients to equal full-time practice for the duration of the New Registrant Program (at least 12 months)
- Provide orientation to the New Registrant to your Midwifery Practice and in the hospital(s) where the New Registrant will be operating, e.g. practice computer systems, buddy shifts, service delivery, meds, supplies etc..
- Are willing to facilitate learning opportunities for the New Registrant to help them achieve the requirements of the New Registrants Program
- Are willing to take on clients on behalf of the New Registrant one month ahead so they can assume client care in July

- Have the ability to consistently offer the New Registrant both hospital and community primary RM experiences
- Operate the Midwifery Practice physically separate from any midwife's living quarters (doors).
- Possess a welcoming, accepting and open attitude within the practice.
- Willingness to integrate New Registrants funding into the business portion of the practice.
- Be aware that the New Registrant must have the following in place before they can provide AHS funded care prior to having an AHS Staff Appointment and Clinical Privileges. They have:
 - Graduated from MRU or another Canadian Midwifery Education Program in the same year I became registered with the CMA
 - Liability Insurance
 - A CMA Practice Permit
 - Completed the AHS Midwifery Staff application
 - An email from AHS PMAO confirming that I am able to start providing care at the Practice working in the clinic only.

Comments: Type here

Signature of Practice Lead/Owner (typed names will not be accepted):

Please save and send this form as an attachment to Juliana at:
admin@albertamidwives.org and allow two weeks for CMA to process and reply.

APPENDIX 4, Step 3: Checklist of New Registrant Program Requirements

NOTE: This document serves as a checklist, and as a report form for your Program completion.

STEP 3: Checklist of New Registrant Program Requirements

NOTE: New Registrants: please keep this form handy and use it as a log for your New Registrant experiences.

New Registrant Name: (First Name) (Last Name)

Mentor Midwife Name: (First Name) (Last Name)

Midwifery Practice Name (Practice Name)

Date of the first day you started work as a New Registrant: (Click or tap to enter a date.)

A. Legislated Requirements:

- 1) Supervision: see identified Mentor Midwife above
- 2) Participate in monthly Chart Reviews with a General Registrant, who has been registered on the CMA General Register for over one year.

Chart reviews: A review of all current cases for the month (on the New Registrant’s and potentially the 1:1 Mentor’s caseload), and at a minimum should include review of all postpartum clients, clients of 30 weeks gestation or later, and clients with specific concerns. Areas of focus may include: documentation consistency, accuracy, informed decision-making conversations and decisions documented, client management, storage of client health information, adherence to CMA policy-related topics and clinical practice guidelines, etc.

#	Date: 1 session a month	Client(s) initials	RM who reviewed chart (s) with you - initials	Area(s) of focus	Comments
1	Click or tap to enter a date.				
2	Click or tap to enter a date.				
3	Click or tap to enter a date.				

4	Click or tap to enter a date.				
5	Click or tap to enter a date.				
6	Click or tap to enter a date.				
7	Click or tap to enter a date.				
8	Click or tap to enter a date.				
9	Click or tap to enter a date.				
10	Click or tap to enter a date.				
11	Click or tap to enter a date.				
12	Click or tap to enter a date.				

B. Practice Requirements set by CMA Council:

Current Council Requirements:

1) Keep Informed Decision-making and client choice at the forefront of all client interactions.

Describe three situations/conversation topics where you did this:

- a)
- b)
- c)

2) Birth Numbers:

NOTE: A set of definitions related to birth numbers and New Registrants are contained at the beginning of the New Registrant Policy. You will need to refer to them for accuracy of reporting your birth numbers.

a) Complete a minimum of 30 births as the Primary Midwife (Primary Births) with Continuity of Care and 20 births as the Second Midwife.

Primary Midwife with Continuity of Care	Second Midwife
Total number of births attended (30 required)	Total Number of births attended (20 required)

b) Complete a minimum of five (5) births in both In-hospital and Community birth situations, as either Primary Midwife or Second Midwife. This will be included in the above total of 50 births.

c) For Community Births, for the duration of their New Registrant Program, make every effort to have a General Registrant Midwife who has completed at least one year of practice past their New Registrant Period in Alberta to serve as Second Midwife.

d) Be a Primary Midwife for In-hospital births, and will make every effort for the duration of their New Registrant Program to have a General Registrant Midwife who has completed at least one year of practice in Alberta to serve as Second Midwife. Alternately, a New Registrant in the Primary Midwife role will have a qualified Second Birth Attendant (see CMA Second Birth Attendant Policy). This means another RM, a Registered Nurse, or another New Registrant.

Please insert client initials for births below as they apply.

Number and client Initials	Date of Birth	In Hospital	Community Birth
1			
2			

3			
4			
5			
6			
7			
8			
9			
10			

Additional Council Requirements:

1) Transfer of care from midwife to physician is a current reality. CMA is interested in ALL of the client situations where you have to/had to transfer. Below, please list the clients who you could not count in your birth numbers, along with the reasons for the transfer. For example,

- a) Primary Care Midwife had to leave a client during the intrapartum period,
- b) Relinquish MRP role antenatally prior to the onset of labour to an OB,
- c) Transfer of care to an OB in intrapartum for C/S, instrumental delivery or beyond the 20% that can be used as per New Reg policy definitions – see policy “Primary Birth When Transfer of Care Occurs”.

There may be other reasons as well.

Client Initials	Reason for the “Complete” Transfer from Midwifery Care

2) Transfer of Care Process and Outcome as a Primary Care Midwife Provider

From your transfer of care list above, pick two examples to meet the following situations

As a Primary Midwife, report here on your comfort, learnings and the interactions with OBs on a transfer of care to another Most Responsible Provider in:

a) pregnancy

b) Intrapartum

c) intrapartum with a transfer of care back in the immediate postpartum

NOTE: from your Primary Midwife numbers above

C. Individual Needs for Experience/Areas to Grow into:

1) Items identified on your **Restricted Activities Survey** from CMA. Please place the identified Restricted Activities items onto this checklist. You will then have them as goal experiences for your New Registrant Program. When the opportunity comes up, please do them. You might also have to plan ahead or seek out some opportunities. Experience with each of these items will serve to enhance your scope of practice.

a) Type here

b) Type here

c) Type here

d) Type here

e) Type here

f) Type here

g) Type here

h) Type here

2) Identified Graduation-related Birth Numbers/Experiences: (as needed)

◀ **Additional Comments** ▶

From time to time, despite great planning, the requisite birth numbers and experiences do not happen during the BMid Program timeframe. The CMA and faculty from the BMid Program will communicate with you about these matters. This area can be addressed during the New Registrant Program process.

Birth numbers, Hospital Experience, Community Birth Experience and Other

The CMA Registration Committee will review this form and make recommendations to the Registrar for next steps.

APPENDIX 5, New Registrant Program Completion Form

New Registrant Program Completion Form

Upon completion of the New Registrant Program, the New Registrant and the 1:1 Mentor Midwife will:

- 1) submit this form AND
- 2) the completed Checklist of New Registrant Program Requirements (Appendix 4) to the CMA.

Please do this by saving both completed documents and sending as an attachment to:
admin@albertamidwives.org

Submission of these completed documents will trigger the process of you moving from New Registrant status to General Registrant with Full Practice Permit.

Mentor Midwife Portion:

NOTE: the following portion of the form ideally would be completed together.

Perceptions and Evaluation of:

1) New Registrant achievement of the following aspects of the Primary Care Midwife Role:

a) managing the intrapartum role as Primary Midwife

« Type Comments »

b) communicating effectively and respectfully with midwifery colleagues

« Type Comments »

c) communicating effectively and respectfully with other providers in the Health Care System

« Type Comments »

d) accountability for care provided

« Type Comments »

e) communication with clients in a client-centered care manner

« Type Comments »

2) New Registrant ability to adeptly organize and prepare to act as Primary Midwife at a Community Birth

« Type Comments »

3) New Registrant ability to exercise clinical and professional judgement and set justifiable priorities in practice

« Type Comments »

4) New Registrant ability to manage obstetrical emergencies.

« Type Comments »

5) New Registrant adherence to CMA documentation standards and policies.

« Type Comments »

6) Areas of further development needed (e.g. Items identified on the Individual Restricted Activities Survey) Please review your initial letter of registration or review the List in Appendix 4 for the complete list of your restricted activities survey and provide information,.

« Type Comments »

I certify that the information provided in the Checklist of New Registrant Program Requirements is accurate and complete (please provide signature below, typed names will not be accepted).

New Registrant: _____ Date: _____

Mentor Midwife: _____ Date: _____

APPENDIX 6, Foundational Resource Documents and Reference Pathways

A) Midwifery Regulation

The Midwifery Regulation (2023) establishes criteria of eligibility for registration as a midwife in Alberta. The purpose of these criteria is to ensure that midwives have the knowledge and skills necessary for safe and effective practice.

B) Health Professions Restricted Activity Regulation

This document outlines the activities granted to Registered Midwives to perform (Section 34) and in addition, those activities which require additional education, skills and judgement which CMA approval is required (Section 35)

C) CMA Standards of Practice

Please see CMA Website “About the College”, click on “Standards and Policies, then click on the Standards of Practice for Midwives in Alberta 2022, or on the Standards for Protection of Persons in Care, or on the Standard for female Genital Mutilation.

D) CMA Code of Ethics

This document guides registered midwives to “do what is right” by their clients, other providers and the public. Please go to the CMA Website and click on “About the College” and scroll down to CMA Code of Ethics.

E) Alberta Competencies for Midwives (2021)

Go to the CMA Website and click on “About the College”. Scroll down to the Alberta Competencies for Midwives