

# Midwives' Association *of* Washington State

## Standards for the Practice of Midwifery

Revised and approved December 6, 2002 by the Midwives' Association of Washington State.

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### I. PRACTITIONER

Midwives:

- 1.1 Practice within the parameters of Washington State law.
- 1.2 Maintain currency of practice through continuing education.
- 1.3 Demonstrate knowledge, clinical skills and judgment as described in the [Midwives' Alliance of North America \(MANA\) Core Competencies for Basic Midwifery Practice](#) or the [American College of Nurse Midwives \(ACNM\) Core Competencies for Basic Midwifery Practice](#).
- 1.4 Foster the delivery of safe, satisfying and accessible maternity services and may provide gynecology, family planning, and well baby care, according to individual licensure.
- 1.5 Participate in state protected quality assurance/improvement activities for the evaluation of individual midwifery practice, as available.
- 1.6 Engage in an ongoing process of risk assessment that begins during the initial consultation and continues through the completion of care.
- 1.7 Seek physician consultation for conditions that present a significant deviation from normal.

1.8 Use the MAWS or ACNM practice mechanism for introducing expanded clinical procedures into midwifery practice.

## **2. ENVIRONMENT**

Midwives:

2.1 Practice in a variety of settings.

2.2 Arrange for 24-hour clinical coverage.

2.3 Foster a safe environment by having the appropriate equipment available including that needed to assess and promote maternal, fetal and newborn well-being.

## **3. DOCUMENTATION**

Midwives:

3.1 Maintain comprehensive, accurate, legible, up-to-date and confidential records of the clinical care provided by the midwife for each client. These shall be made available to appropriate health care personnel upon consultation or transfer of care.

3.2 Maintain written guidelines that are congruent with state regulations for the midwifery profession. Guidelines shall contain a clear, written plan for physician consultation, collaboration, referral, hospital access and transfer of care.

## **4. CLIENT RELATIONS**

Midwives:

4.1 Provide thorough informed choice in accordance with [RCW 7.70](#), which includes risk/benefit analysis of options for care, and uphold the client's right to information and resources.

4.2 Incorporate client education in clinical care.

4.3 Provide accurate information regarding the scope of midwifery practice, fees, medical consultation arrangements and the rights and responsibilities of the client.

4.4 Emphasize client's responsibility for active participation in her own care, and encourage the participation of family members in care as appropriate.

4.5 Elicit client feedback to evaluate and modify services, and provide an avenue for resolving client grievances.

4.6 Affirm the client's right to self-determination while acknowledging that the midwife has a duty to use her professional judgment and skills to provide safe and competent care that is within her scope of practice and written guidelines. The midwife may decline to provide care but shall make appropriate arrangements for referral and/or the timely transfer of care.

## **5. COMMUNITY RELATIONS**

Midwifery:

4.1 Is an autonomous profession. Midwives work interdependently with each other and other health care providers to promote the optimal health and well-being of women and babies.

4.2 Thrives within a community context in which collaboration with other professionals fosters clients' physical, psycho-social, spiritual, economic, cultural and family well-being.

Many MAWS members are also members of the National Association of Certified Professional Midwives (NACPM). To read NACPM's Standards for Practice, [click here](#).