

CHAPTER 33 – MIDWIFERY JOINT COMMITTEE

SECTION .0100 – MIDWIFERY JOINT COMMITTEE

21 NCAC 33 .0101 ADMINISTRATIVE BODY AND DEFINITIONS

(a) The responsibility for administering the provisions of G.S. 90, Article 10A shall be assumed by an administrative body, the Midwifery Joint Committee, hereinafter referred to as the "Committee." The certified nurse midwife shall hereinafter be referred to as "midwife."

(b) Definitions:

- (1) "Primary Supervising Physician" means the licensed physician, who by signing the certified nurse-midwife application, is held accountable for the on-going supervision, consultation, collaboration and evaluation of the medical acts performed by the certified nurse-midwife as defined in the site specific written clinical practice guidelines. A physician in a graduate medical education program, whether fully licensed or holding only a resident's training license, shall not be named as a primary supervising physician. A physician in a graduate medical education program who is also practicing in a non-training situation may supervise a certified nurse-midwife in the non-training situation if fully licensed.
- (2) "Back-up Primary Supervising Physician" means the licensed physician who, by signing an agreement with the certified nurse-midwife and the primary supervising physician(s) shall be held accountable for the supervision, consultation, collaboration and evaluation of medical acts by the certified-nurse midwife in accordance with the site specific written clinical practice guidelines when the Primary Supervising Physician is not available. The signed and dated agreements for each back-up primary supervising physician(s) shall be maintained at each practice site. A physician in a graduate medical education program, whether fully licensed or holding only a resident's training license, shall not be named as a back-up primary supervising physician. A physician in a graduate medical education program who is also practicing in a non-training situation may be a back-up primary supervising physician to a certified nurse-midwife in the non-training situation if fully licensed and has signed an agreement with the certified nurse-midwife and the primary supervising physician.
- (3) "Obstetrics" means a branch of medical science that deals with birth and with its antecedents and sequels including but not limited to prenatal, intrapartum, postpartum, newborn, gynecology and otherwise unspecified primary health services for women.

*History Note: Authority G.S. 90-178.4;
Eff. February 1, 1984;
Amended Eff. July 1, 2000; October 1, 1988.*

21 NCAC 33 .0102 FEES

- (a) The fee for a new application and initial approval shall be one hundred dollars (\$100.00).
- (b) The fee for annual renewal shall be fifty dollars (\$50.00).
- (c) The fee for reinstatement for a lapsed approval shall be five dollars (\$5.00).

*History Note: Authority G.S. 90-178.4(b);
Eff. February 1, 1984;
Amended Eff. July 1, 2000.*

21 NCAC 33 .0103 APPLICATION FORM

The application form required by the committee to obtain approval to practice as a midwife is designated Form No. 1. The form may be obtained from the committee. The form requires information on the applicant's education, evidence of the applicant's certification by the American College of Nurse Midwives, and identification of the physician(s) who will supervise the applicant and the sites where the applicant intends to practice midwifery.

*History Note: Authority G.S. 90-178.4(b); 90-178.5;
Eff. February 1, 1984;
Amended Eff. January 1, 1989.*

21 NCAC 33 .0104 PHYSICIAN SUPERVISION

The applicant shall furnish the committee evidence, satisfactory to the committee, that the applicant will perform the acts authorized by the Midwifery Practice Act under the supervision of a physician who is actively engaged in the practice of obstetrics in North Carolina. Such evidence required by the committee shall include a description of the nature and extent of such supervision and a delineation of the procedures to be adopted and followed by each applicant and the supervising physician responsible for the acts of said applicant for the rendering of health care services at the sites at which such services will be provided. Evidence to be provided to the committee shall include:

- (1) mutually agreed upon written clinical practice guidelines which define the individual and shared responsibilities of the midwife and the supervising physician(s) in the delivery of health care services;
- (2) mutually agreed upon written clinical practice guidelines for ongoing communication which provide for and define appropriate consultation between the supervising physician(s) and the midwife;
- (3) periodic and joint evaluation of services rendered, e.g. chart review, case review, patient evaluation, and review of outcome statistics; and
- (4) periodic and joint review and updating of the written medical clinical practice guidelines.

*History Note: Authority G.S. 90-178.4(b);
Eff. February 1, 1984;
Amended Eff. July 1, 2000; October 1, 1988; April 1, 1985.*

21 NCAC 33 .0105 DUE PROCESS

(a) The privilege to practice midwifery may be denied, revoked, or suspended for the reasons set forth in G.S. 90-178.6. The applicant aggrieved by a decision of the Committee shall be entitled to a hearing pursuant to the provisions of G.S. 150B, Article 3A.

(b) Complaints.

- (1) A complaint regarding a violation of the Midwifery Practice Act or Rules shall be submitted in writing and document:
 - (A) the name of the certified nurse-midwife or other person involved;
 - (B) a description of the alleged behavior or incident; and
 - (C) the name, mailing address and phone number of the person filing the complaint;
- (2) The complaint shall be delivered to the Committee administrative office by mail, private carrier or in person. Complaints transmitted by facsimile or electronic mail shall be accepted.

(c) Action on a Complaint. Action on a complaint consists of the following:

- (1) The Committee shall receive and acknowledge complaints, open a file and initiate complaint tracking;
- (2) Complaints shall be screened to determine jurisdiction and the type of response appropriate for the complaint;
- (3) Investigation:
 - (A) If the facts clearly indicate a Midwifery Practice Act violation, the Committee shall commence an investigation; and
 - (B) A report of each investigation shall be prepared for the Committee's review;
- (4) Formal and Informal Hearings:
 - (A) The Committee, after review of an investigative file, may schedule an informal meeting.
 - (B) If the matter cannot be resolved informally, then a formal hearing shall be held.
 - (C) No Committee member shall participate in more than one of the following steps in the enforcement process:
 - (i) investigation;
 - (ii) informal hearing; or
 - (iii) formal hearing; and
 - (D) Members of the Committee shall not make ex-parte communication with parties to a hearing.
- (5) Final Orders: As soon as possible, but at least within 60 days of a hearing, the Committee shall issue its final decision in writing specifying the date on which it shall take effect. The Committee shall serve one copy of the decision on each party to the hearing.

- (6) Compliance: The Committee Chair shall cause a follow-up inquiry to determine that the orders of the Committee are being obeyed.
- (d) Formal Hearing. Formal hearings shall be conducted in accordance with G.S. 150B.
- (e) Disciplinary Sanctions.
 - (1) The following types of disciplinary sanctions may, among others, be utilized by the Committee:
 - (A) Letter of Reprimand;
 - (B) Probation;
 - (C) Suspension of approval;
 - (D) Nonrenewal of Approval;
 - (E) Revocation of approval; and
 - (G) Injunction.
 - (2) The Committee may request information from professional associations, professional review organizations (PROs), hospitals, clinics or other institutions in which a certified nurse-midwife performs professional services, or possible chemical abuse, or incompetent or unethical behavior.
 - (3) The Committee shall provide notice of sanction taken by it to other public entities as necessary to ensure that other state Boards and enforcement authorities receive the names of applicants disciplined.

*History Note: Authority G.S. 90-178.6;
Eff. February 1, 1985;
Amended Eff. August 1, 2002; October 1, 1988.*

21 NCAC 33 .0106 NURSE MIDWIFE APPLICANT STATUS (REPEALED)

*History Note: Authority G.S. 90-178.2; 90-178.5;
Eff. March 1, 1991;
RRC Objection Eff. May 18, 2000 due to lack of statutory authority;
RRC returned rule to agency on June 19, 2000;
Codifier of Rules removed rule from the NCAC Eff. June 19, 2000.*

21 NCAC 33 .0107 NURSE MIDWIFE APPLICANT STATUS

Graduate Nurse Midwife Applicant status may be granted by the Midwifery Joint Committee under the following circumstances:

- (1) a nurse licensed to practice as a registered nurse in North Carolina who meets all of the following criteria:
 - (a) has graduated from a nurse midwifery education program which meets the criteria of the American College of Nurse Midwives for graduates to seek certification;
 - (b) has applied to take or is waiting for results of the certification exam; and
 - (c) whose application for approval as a certified nurse midwife has been received by the Midwifery Joint Committee.
- (2) nurse midwife applicant status may not exceed a period of six months beyond date of completion of nurse midwifery education program or until notice of certification or failure of certification is received, whichever occurs first.
- (3) a nurse midwife applicant, described in Item (1) and (2) of this Rule, may function in accordance with 21 NCAC 33 .0104 and 21 NCAC 33 .0105 with the following limitations:
 - (a) wear identification as a "Graduate Nurse Midwife";
 - (b) have no prescribing privileges;
 - (c) practice only in situations where the supervising physician or a Certified Nurse Midwife approved to practice in the state of North Carolina is physically present in the practice site in which the applicant is working; and
 - (d) have supervising physician or a Certified Nurse Midwife approved to practice in the state of North Carolina countersign all medical notations in patient records on a daily basis.
- (4) In the event the individual leaves the job in which he/she has worked as a nurse midwife applicant before approval as a certified nurse midwife is granted, the individual must submit a written explanation to the Midwifery Joint Committee before he/she may apply to work in the nurse midwife applicant status in another job.

History Note: Authority G.S. 90-178.2; 90-178.3; 90-178.5; 90-171.83;
Eff. April 1, 2001.

21 NCAC 33 .0108 SUSPENSION OF AUTHORITY TO EXPEND FUNDS

In the event the Midwifery Joint Committee's authority to expend funds is suspended pursuant to G.S. 93B-2(d), the Committee shall continue to issue and renew licenses and all fees tendered shall be placed in an escrow account maintained by the Committee for this purpose. Once the Committee's authority is restored, the funds shall be moved from the escrow account into the general operating account.

History Note: Authority G.S. 93B-2;
Eff. May 1, 2011.