

# ON CALL

Autumn 2021



College of  
**Midwives**  
of Ontario

Ordre des  
**sages-femmes**  
de l'Ontario



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# MESSAGES FROM THE CHAIR AND REGISTRAR

## Claire Ramlogan-Salanga, RM, Chair



Autumn is upon us, and thanks to the COVID vaccine and the skill of our province's health care workers, many of us are returning to some semblance of what was. While our work at the College remains mostly remote, we continue to support the choices of birthing people in Ontario by setting clear standards for midwives.

I'm particularly proud of the innovative quality assurance program that the College has developed—after years of consultation—to help support midwives' professional development and ongoing learning. By creating a self-directed professional development plan, midwives will now be able to tailor their learning activities to better meet the specific needs of their communities. We are excited to see this program take root and support the growth and quality of midwifery in Ontario.

Our Council is also committed to such continuous improvement, and we are embarking upon a pilot project for evaluating our effectiveness. The pilot's innovations will build in additional space for ongoing reflection throughout the year, and create new opportunities for the Council's Executive Committee to monitor overall performance and stay engaged with each Committee Chair.

I look forward to sharing the results from these initiatives in future issues of *On Call*. From all of us on Council, have a safe and happy autumn.

## Kelly Dobbin, Registrar and CEO



It's hard to believe COVID has physically separated us for nearly two years. In spite of the pandemic's many challenges, the midwifery community continues to work together to ensure that clients receive safe and ethical care, and we continue to regulate the profession in the public interest.

On page 7 of *On Call*, you'll learn how the College was recognized by the Ministry of Health for its operational excellence during this difficult time.

The Ministry's College Performance Measurement Framework summary report commended the College for our "rigorous and structured process for the development and revision of guidance that is based on the principles of good regulation."

Our team is eager to build upon this success in the coming months, and to continually engage with the profession and the public as we do so. Whether you are a midwife, a health care professional, or a member of the public, there are many opportunities for you to join us in this work. In this edition of *On Call*, you'll read about our public consultations on two standards (Clinical Education and Student Supervision and Blood Borne Pathogens.) and about open opportunities to join our committees—to name just two.

As always, I welcome any feedback that you may have about our work at the College. Please feel free to reach out at [k.dobbin@cmo.on.ca](mailto:k.dobbin@cmo.on.ca).

# OCTOBER COUNCIL HIGHLIGHTS

[Click to read the full meeting materials](#) from our October Council meeting. For more information about how our Council operates, see page 14 of this edition of *On Call*.



## Strengthening Council Effectiveness

Council members reviewed feedback from June's training day, which began with a learning session from Evelyn Myrie of EMPOWER Strategy Group on anti-Black racism. Council found this workshop helpful and highly relevant to the College's strategic plan.

Next, Diane Kawarosky of The Soft Skills Group led a lesson on Chair training. Attendees reported that the information was easily applicable to our work at the College, and that it will help facilitate more effective meetings.

## Statement of Operations

Council heard a report from the Executive Committee, who approved the College's Q1 Statement of Operations at their recent meeting. Carolyn Doornekamp, the College's outgoing Director of Operations, joined the meeting to present the statement in more detail.

Council found that the College is in a good cash flow position with no concerns to report.

## Professional Development Portfolio

Lilly Martin, Chair of the Quality Assurance Committee, introduced the Professional Development Portfolio document, which was first reviewed by Council at the June 23, 2021 meeting.

The Professional Development Portfolio program is self-directed learning plan and will be implemented on 3-year reporting cycles.

The program includes all registered members of the College—whether Inactive, General or Supervised—as a mechanism to keep members engaged with the profession in a process that is flexible and contingent on members' own unique needs and practise.

A process for exemption will be available for midwives who may be unable to fulfill the requirements. There will also be a section specific to midwives who have an accommodation under the College's Accommodation Policy.

Council approved the document with the understanding that the issues discussed regarding exemption will be incorporated into the decision-making of the Quality Assurance Committee.

## Thank you Jan and Maureen!

We say goodbye to professional Council members Jan Teevan and Maureen Silverman. Jan has served for nine consecutive years on Council and Maureen has served three consecutive years.

We are grateful for their significant contributions to the College, and wish them all the best in their future endeavours.

## Welcome Hardeep and Alexia!

We were pleased to welcome Hardeep Fervaha, RM, and Alexia Singh, RM, to their first College Council meeting as newly-elected Professional members.

You can read more about why Hardeep and Alexia ran for Council on page 15 of this issue of *On Call*.

**Council meetings are open to midwives and to the general public, and are currently held by videoconference. The next meeting is Wednesday, December 8, 2021.**

# DAY FOR TRUTH AND RECONCILIATION

September 30 marked the first National Day for Truth and Reconciliation in Canada. The day honours the lost children and Survivors of residential “schools,” and their families and communities. At the College, we reflected on how Canada’s ongoing legacy of colonization has sought to eradicate the practice of Indigenous midwifery—and how Indigenous midwives are leading its revival.

**“Indigenous midwives were once a cornerstone of every Indigenous community. The silencing of Indigenous midwifery occurs as a result of colonization and the ongoing medicalization and systemic racism in the Canadian health care system.”**

**National Aboriginal Council of Midwives**



On October 5, 2021, the College’s Council and staff were grateful to learn from Claire Dion Fletcher, an Indigenous (Lenape- Potawatomi) and mixed settler Registered Midwife practising at Seventh Generation Midwives Toronto and teaching at [X University](#).

Claire’s presentation provided historical overview and current context of the issues and experiences of Indigenous communities in Ontario as they intersect with midwifery care and health institutions. It was a critical opportunity for the College to reflect on the barriers that still exist for Indigenous people in accessing healthcare, and how our own work as a health profession regulator can perpetuate these barriers if left unexamined.

## Indigenous Midwifery in Canada

In the late 19th century, the Canadian government began evacuating pregnant Indigenous people from their communities to give birth in federally-operated hospitals as part of a broader campaign of forced assimilation—which included residential “schools.”

Today, pregnant people living in remote Indigenous communities are still often required to access medical treatment in facilities thousands of kilometres away from their homes.

This separation from their families, which can last for weeks or months, can cause distress, premature birth, birth complications, and a lack of continuity in post-natal care—as well as a profound sense of cultural upheaval. As a result, Indigenous people giving birth, and their newborns, still face far poorer health outcomes than other populations.

Yet there is a growing revival in Indigenous midwifery, and many Indigenous midwives in Ontario are returning birth back to communities and protecting their cultural practices.

## Indigenous Midwifery and Regulation

Indigenous midwives in Ontario may choose to become registered with the College of Midwives of Ontario, or they may choose not to be registered and to use the title of Aboriginal Midwife. You can [learn more about this distinction here](#). The College does not regulate health professionals who use the title Aboriginal Midwife, however, we recognize and support the practice and growth of Indigenous midwifery across the province.

## More Learning Resources

### [Bring Birth Back: Aboriginal Midwifery Toolkit](#)

This toolkit from the National Aboriginal Council of Midwives (NACM) is a resource for communities to work towards the return of birth and Indigenous midwifery.

### [Association of Ontario Midwives – Indigenous Midwifery](#)

The Association of Ontario Midwives is dedicated to advancing the practice of Indigenous/ Aboriginal and registered midwives in Ontario.

### [Conceptualising cultural safety at an Indigenous-focused midwifery practice in Toronto, Canada.](#)

This study explores how clients at an urban, Indigenous-focused midwifery practice conceptualized and experienced culturally safe care.

### [Podcast: Voices from the Field 11 – Supporting Indigenous Midwifery during COVID-19](#)

This episode spotlights Carol Couchie and Claire Dion Fletcher, co-chairs of NACM, as they discuss how Indigenous midwifery has been impacted by COVID.

## Mental Health Supports Available

Survivors can call **1-866-925-4419** for emotional crisis referral services and information on other health supports from the Government of Canada.

Indigenous peoples can also access 24/7 counselling and crisis intervention at The Hope for Wellness Help Line at **1-855-242-3310**, or by online chat.

# TAKE PART IN A COLLEGE CONSULTATION

## Share your feedback on the College's proposed Clinical Education and Student Supervision and Blood Borne Pathogens Standards

Consultation with midwives, midwifery organizations, and the public is an essential part of the College's policy development process, and in keeping with our guiding principles of accountability and transparency.

The College is currently seeking feedback on proposed changes to two standards: **Clinical Education and Student Supervision** and **Blood Borne Pathogens**.

Midwives, current and former midwifery clients, midwifery stakeholders, and the general public are all encouraged to contribute. The consultations will be open until **Friday, November 12, 2021**.

[>>> Clinical Education and Student Supervision Standard](#)

[>>> Blood Borne Pathogens Standard](#)



## JOIN A COUNCIL COMMITTEE

We're accepting applications from registered midwives to become non-Council Committee Members (Professional) on several of our committees.

Joining a College Committee is a great opportunity to take an active role in regulating your profession to protect the public, and to engage more deeply with the midwifery community and expand your professional network.

If appointed to a committee, you will be compensated for your time as per our Fees & Remuneration By-law. Appointments are for one-year terms, up to a maximum of six terms.

**As a Committee Member, your duties would include:**

- Spending time preparing for meetings/hearings/panels
- Attending meetings/hearings by video conference
- Attending a one-day training workshop (discipline) by video conference
- Attending a ½ day orientation by video conference (if necessary)

For time commitment guidelines, information about each committee, and the application package, [please click here](#). Application packages can be submitted by emailing [cmo@cmo.on.ca](mailto:cmo@cmo.on.ca).



# COLLEGE RECOGNIZED FOR GOOD GOVERNANCE, STRONG REGULATORY POLICY

The Ontario Ministry of Health has commended the College of Midwives for our effective governance and regulatory practices.

To demonstrate how we are continually improving accountability and transparency, Ontario's 26 health professions colleges are now required to report on our work to Ontario Ministry of Health using The College Performance Measurement Framework (CPMF).

The CPMF documents how colleges are performing as organizations—including registering applicants, measuring practice improvement of regulated health professionals, and processing complaints about their registrants.

This week, the Ministry released a summary report of the framework's submissions, and gave a special acknowledgement to the College of Midwives for two "notable" and "commendable" practices.



*"The Working Group identified the principle-based policy development process by the College of Midwives of Ontario (CMO) as a notable practice. The CMO uses a rigorous and structured process for the development and revision of guidance that is based on the principles of good regulation." - Ministry of Health*

We deeply are proud of this recognition, and look forward to building upon this work in the coming months.

[>> Read our submission to the CPMF](#)

[>> Read the Summary Report](#)

## LEARN ABOUT MANDATORY REPORTING

Do you know when you're required to make a mandatory report to the College? Our webinar on Thursday, November 25 will provide a helpful guide.

**Save the date!** On Thursday, November 25, 2021, the College is partnering with Association of Ontario Midwives (AOM) to hold a webinar on mandatory reporting requirements for midwives.

Midwives are legally obligated to provide certain information about themselves, other midwives, or other regulated health professionals to the College, or to other regulators or authorities. This is called mandatory reporting.

Mandatory reports ensure the public remains protected, and midwives practise with the necessary competence and skill.

Watch your inbox: we'll be releasing more information about our webinar in the coming weeks.





# UPDATE FOR INTERNATIONALLY EDUCATED MIDWIVES

**The College is committed to creating pathways for internationally educated midwives to practise the profession in Ontario.**

Under the Registration Regulation 168/11 made under the Midwifery Act, 1991, all midwifery applicants are required to have qualifications and current clinical experience to be able to become registered to practise midwifery in Ontario.

To help meet these requirements, the Chang School of Continuing Education at Ryerson University in Toronto has been providing a bridging program for internationally educated midwives called the International Midwifery Preregistration Program (IMPP).

In August 2021, the Chang School's administration informed the College that it would not deliver the IMPP in the 2021-2022 academic year.

**The College is committed to filling this gap and ensuring that qualified internationally educated midwife applicants have a route of entry into the profession.** We are acting swiftly to develop and implement a new bridging program and will share information as soon as it is available.

All international applicants who are seeking registration in Ontario are asked to contact us at [registration@cmo.on.ca](mailto:registration@cmo.on.ca) pending further official information from the College.

# PRACTICE ADVICE

Our quarterly advice column answers the question: *When must a midwife stop providing care to a client?*

## Case Scenario:

Midwife B discharged her client once the full course of midwifery care had been provided. Care was then transferred to the client's family physician.

Midwife B received a phone call from the former client a few days later, stating that her baby's skin appeared to be yellow and asking if Midwife B could come over to look. Midwife B asked the former client to text a picture of her baby. She also asked the former client if the baby had a fever, which the former client confirmed.

After looking at the baby's picture on her phone, Midwife B told the former client that her baby had jaundice, and to contact her family physician for further care.

**Question:** Did Midwife B fail to meet any Professional Standards in this case?

## Answer:

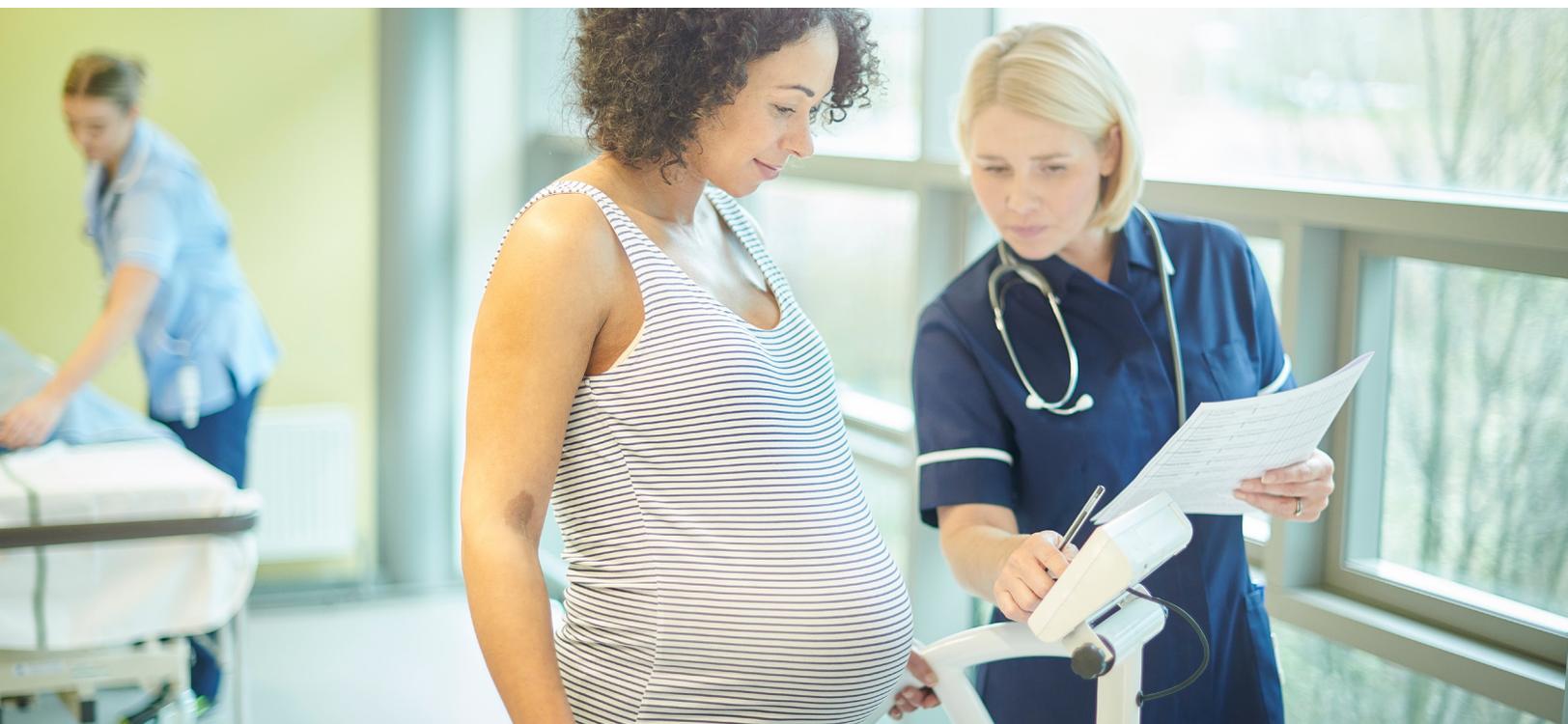
Midwives cannot provide care to a former client once they have been discharged. In this case, since the former client was discharged, Midwife B should not have diagnosed the baby's condition.

If a former client has concerns that warrant immediate testing and care, a midwife should instruct that former client to seek care at a hospital's emergency department instead of contacting their family physician.

## Relevant Professional Guidelines:

The College's "[Guideline on Ending the Midwife-Client Relationship](#)" states "no further care is provided to the client after discharge and the midwife-client relationship comes to its natural conclusion."

Do you have a question about professional practice or standards?  
Visit our [practice advice page](#), or contact [practiceadvice@cmo.on.ca](mailto:practiceadvice@cmo.on.ca).



# Don't sleep on it!

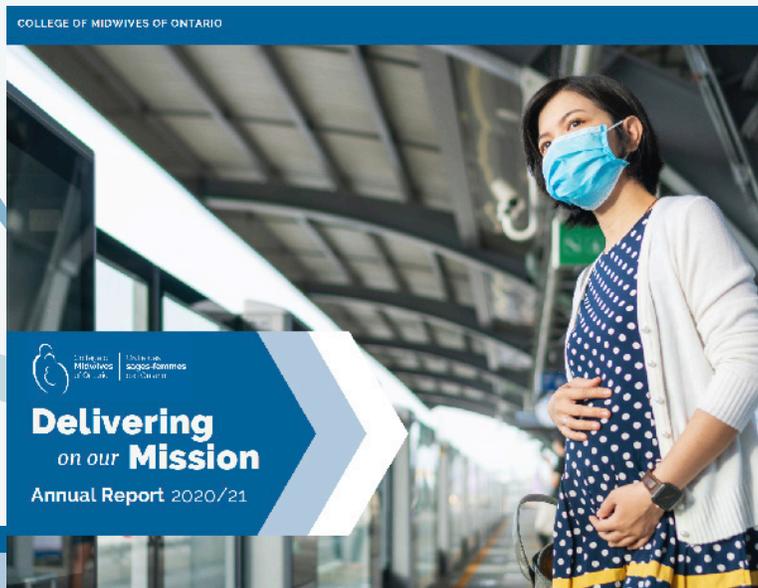
The deadline to renew your College registration is **November 1, 2021.**

Skip the late penalties and [renew today.](#)



# 2020-2021 Annual Report

During a most tumultuous year, the College continued to deliver on our mission: serving the public interest by ensuring that midwives met high standards, and acting swiftly when risks were identified. [Read our full 2020/2021 Annual Report.](#)



COLLEGE OF MIDWIVES OF ONTARIO

## Measuring our Annual Performance

As the regulator of midwifery in Ontario, the College has important goals to achieve. We work to ensure that midwives possess and maintain the knowledge, skills, and behaviours to provide safe, ethical and effective care and we take swift action when risks are identified.

To meet these critical outcomes, we must continually evaluate our performance and publicly report on the execution of our core functions.

The College created a voluntary **Performance Measurement Framework** in 2019 to ensure we remain effective in our mission. Its standards measure our performance in four domains that seek to provide a balanced picture of all functional areas of the College.

- Regulatory Policy
- Suitability to Practise
- Openness and Accountability
- Good Governance.

We are pleased to announce that we have fully met 15/20 of our standards for 2020/2021, and that we've identified a course of action to improve upon our 5 partially met standards.

✓ 15 Standards Met    ⚪ 5 Standards Partially Met

Over the following pages, you'll learn about how the activities within these four domains serve the College's mission and mandate, how we assess our performance, and how we are committing to continual improvement in the years to come.



## The College by the Numbers

1,064

Registered midwives in Ontario

64

New midwives registered in 2020/21

195

Class change applications processed



98% of midwives fulfilled their College quality assurance requirements



97% of midwives renewed their College registration by the deadline



92% of midwives required to submit an active practice report met the requirement

184

Inquiries received and responded to by our practice adviser

0

Reports of unauthorised practice were made to the College

51

Complaint matters closed by the Inquiries, Complaints and Reports Committee

45

Complaint matters received

5

Complaints eligible for Alternative Dispute Resolution that proceeded with consent of all parties

62

Mandatory and other reports received by the College

100%

of reports received by the College were acted upon. All but 1% resulted in a formal investigation.





## Are midwives in Ontario required to be vaccinated?

Vaccines play an important role in protecting the most vulnerable—particularly those from communities who have been disproportionately impacted by COVID-19.

**The College strongly encourages all eligible midwives to get vaccinated unless contraindicated.**

The province is not currently mandating that healthcare providers be required to receive a COVID-19 vaccine.

However, hospitals are mandated to implement vaccine policies where staff are required to be vaccinated, provide proof of medical exemption, or complete an educational module and receive frequent COVID-19 testing if they choose to not be vaccinated.

Hospitals may choose to adopt their own vaccine policies that go beyond those mandated by the government.

Under these policies, disciplinary action may be taken by the hospital, up to and including loss of hospital privileges or termination, for midwives who do not show proof of vaccination without a valid medical exemption.

Midwives who lose hospital privileges as a result of these vaccine policies will have a difficult time meeting the College's Professional Standards 18 and 19, which require midwives to offer and provide clients with their choice of birthplace.

A midwife who is unable to provide hospital births must promptly inform their clients of this fact. If the client chooses a hospital birth at any time during their care, the midwife must transfer them to another midwife for care in the hospital setting. If there are no other midwives to provide this care to their client, the midwife is not able to meet the College's [Professional Standards](#).

Failing to maintain a standard of the profession is an act of professional misconduct under the Professional Misconduct Regulation.

## How does the College's Council work?

The College's work is overseen by a Council, consisting of no more than eight midwives elected by the profession, and no more than seven public members appointed by the government of Ontario.

Council sets the strategic direction of the College and ensures our long-term success. Council also holds staff accountable for the way we fulfill our regulatory mandate and duties. You can read more about what this looks like in practice in the College's [general by-law](#) and [governance policies](#).

Council acts openly and is accountable to members of the public, members of the College and stakeholders. [We invite individuals](#) to address Council at meetings on issues relevant to its role of regulating the profession in the public interest.



## Your College Council

### Elected Professional Members

Claire Ramlogan-Salanga, RM, Chair  
Edan Thomas, RM, Vice-Chair  
Hardeep Fervaha, RM  
Claudette Leduc, RM  
Lilly Martin, RM  
Karen McKenzie, RM  
Isabelle Milot, RM  
Alexia Singh, RM

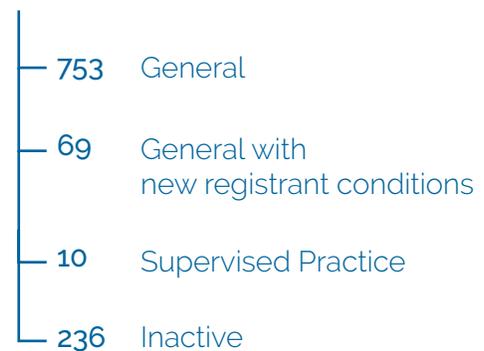
### Public Members

Donald Strickland, Vice-Chair  
Pete Aarssen  
Marianna Kaminska  
Judith Murray  
Oliver Okafor



## Current College Membership

Total of 1,068  
registered midwives  
as of October 6, 2021.



# WELCOME HARDEEP AND ALEXIA

We are pleased to welcome Hardeep Fervaha and Alexia Singh to the College's Council! Hardeep and Alexia were elected by members in June, and attended their first Council meeting in October. We have reprinted their platforms below.



## Hardeep Fervaha

I am a trustworthy, dependable, and equity-driven midwife practicing since 2013. I identify as an Indo-Canadian mother of 2 and am the daughter of immigrant parents.

I have been a client of midwifery care and work in a full scope practice in Burlington. Our team is well integrated in our community and hospital, and has a strong home birth rate. I am also a member of the 2021 Equity Admissions Review Team which assisted in the assessment of applicants opting to participate in the Facilitated Black Application Process for the MEP at McMaster University. I believe this foundation has helped foster a supportive work environment and will allow me to bring valuable insight.

In my community, there are no midwives working at the College. My motivation to serve on Council stems from wanting to share my unique experiences and represent my region and its perspectives.

I hope to bring a lens of equity and social justice to support the strategic priorities of the College. I am also motivated to join the CMO to use the role as a method for building engagement and fostering trust with other midwives. Engaging with midwives across Ontario to bring awareness about what is happening at a College level is important and aligns with the priorities of the CMO.

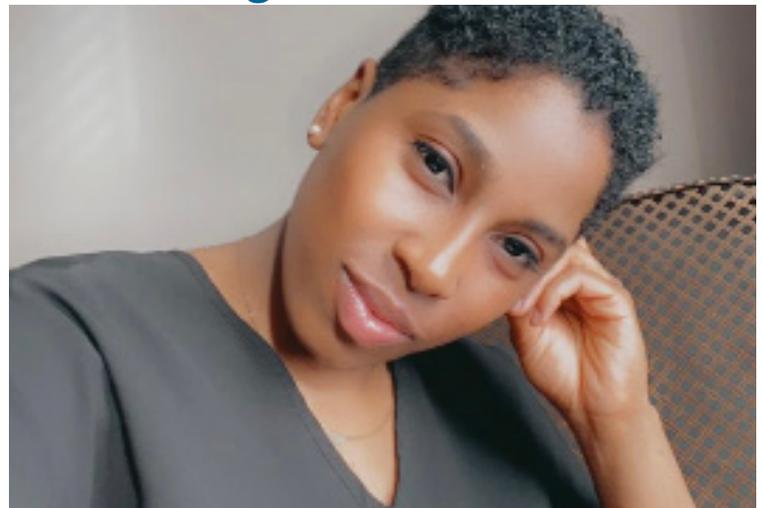
Greetings! My name is Alexia Singh, and I have been working in York/ Durham region since 2015. I am deeply passionate and proud of the midwifery profession and how we serve our community. Therefore, it is just as important that how we provide care continues to be rooted in safe, equitable and evidenced based practice.

I identify as a Black Midwife and strongly believe that my lived experiences allow me to contribute a unique perspective in the improvement of provision of client care. Ensuring that, not only are we continuously evolving to allow for diverse methods of practice, but we do this with the public interest and safety at the heart of every decision.

Part of the CMO's strategic plan is to facilitate improved public access and understanding of the College's role. With collaboration and teamwork, I will be able to positively contribute to achieving this goal, especially as it pertains to racialized and marginalized populations who face tremendous barriers accessing College regulations and processes. I want to collaborate with fellow colleagues, members of the public and partners to ensure we continue to develop new and innovative ways for midwives to work within our regulatory framework, and be assessed appropriately.

Ultimately, I want to become a member of the council so that I may develop a deeper understanding of the various ways in which the CMO protects the public and use this knowledge to contribute to ensuring the highest standards of regulatory performance for our profession.

## Alexia Singh



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**Victoria Marshall**

Communications & Stakeholder Relations Officer  
(on leave from July 2021-August 2022)

## Follow us on social media



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**From all of us at the College,  
have a safe and happy autumn!**



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**sages-femmes**  
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