



College of
Midwives
of Ontario

Ordre des
sages-femmes
de l'Ontario

Guideline on Ending the Midwife-Client Relationship

Revised July 1, 2024

practiceadvice@cmo.on.ca

416-640-2252

Guideline on Ending the Midwife-Client Relationship

Introduction

Midwives must adhere to regulations and standards of the profession when discontinuing a professional relationship with a client. This guideline aims to assist in understanding the expected procedures and ethical considerations involved in such decisions. Discontinuation of services must be approached by midwives with professionalism after careful consideration of the client's condition and the reasons for discontinuation, and the availability of alternative care options.

Midwives must exercise their professional judgment and ensure compliance with the Professional Misconduct Regulation made under the *Midwifery Act, 1991*, the Professional Standards for Midwives, and the *Ontario Human Rights Code, 1990*¹. If a midwife complies with regulatory, legal, and ethical frameworks and determines that they can no longer provide care to a client, it is within their discretion to discontinue services.

Clients are entitled to dignity and respect in all interactions with health professionals. The decision to terminate a midwife-client relationship is serious, often taken because the relationship has been compromised, or there are issues impacting the midwife's ability to provide appropriate and safe care that cannot be resolved.

This guideline is not a substitute for legislation and regulations that govern the midwifery profession in Ontario. If there is any conflict between this guideline and the law, the law prevails.

Legal and Ethical Framework

Ontario Human Rights Code, 1990: Midwives cannot end the midwife-client relationship based on protected grounds such as age, ancestry, colour, race, citizenship, ethnic origin, place of origin, creed, disability, family status, marital status, gender identity, gender expression, receipt of public assistance in housing, record of offences in employment, sex, and sexual orientation.

Professional Standards and Judgment: All decisions affecting the care and treatment of clients are taken within the context of legislation, regulation, and midwifery standards. Midwives remain accountable for their professional and clinical judgment, including the choice to terminate a midwife-client relationship where they believe it is warranted.

¹ R.S.O. 1990, c. H. 19

Professional Misconduct Regulation Criteria

It is professional misconduct under the Professional Misconduct Regulation to discontinue professional services that are needed except in certain situations where it would be considered appropriate. The Professional Misconduct Regulation defines professional misconduct to include:

- *Discontinuing professional services that are needed unless the discontinuance would reasonably be regarded by members as appropriate having regard to,*
 - i. *The Registrant's reasons for discontinuing services*
 - ii. *The condition of the client*
 - iii. *The availability of alternate services*
 - iv. *The opportunity given to the client to arrange alternate services before the discontinuation.*
- *Where a member closes the member's practice, failing to take reasonable steps to give appropriate notice of the closure to each client.*

Therefore, before discontinuing services, midwives must consider the above factors.

Obligations When Ending the Midwife-Client Relationship

Midwives must carefully consider whether their justification(s) for discontinuing midwifery services are reasonable. Midwives must ensure that the decision to end care and the rationale for doing so are clearly communicated to the client, and thoroughly documented in the client record. Taking these steps ensures that the client is aware of the reason for the termination and that there is a record for future reference. Midwives who are suspended, revoked, or move to the inactive class, as well as those ceasing practice permanently, temporarily, or relocating must ensure clients are notified and have access to care. According to the College's Record Keeping Standard, documentation of every transfer of, and discharge from care must include the reason for the transfer or discharge.

Before discontinuing services, midwives must assess the client's current health condition. This assessment is important to ensure that the discontinuation of services does not compromise the client's health. It is a standard of practice of the profession to never abandon a client in labour. Documentation should include a detailed account of the client's condition and any potential health risks associated with ending the care.

Midwives should take steps to minimize disruptions in health care for the client. Considering the availability of alternative care providers is important, and connecting a client with their new provider helps maintain continuity of care. Midwives should provide detailed guidance and assistance in this process, including helping clients understand their options and facilitating referrals to other health care providers. A client may identify a new provider on their own and must be given sufficient time and support to arrange for alternative care. The goal is to help clients transition to new care arrangements ensuring consistent care. It is a professional

standard for midwives to ensure clients and health care providers know who the most responsible provider is throughout the client's care.

If a client is being transferred to another practitioner, midwives are expected to conduct a complete and accurate transfer of client information to the alternative provider at the time of transfer of care, aiming to prevent any foreseeable gaps in care. This includes notifying the new care provider of any pending test results or outstanding investigations at the time of transfer of care.

Midwives have record keeping obligations they must adhere to when ending the midwife-client relationship, including the following:

- Documentation: Ensure all considerations, decisions, reasons, and discussions regarding the termination of care are thoroughly documented in an accurate and objective manner.
- Access to Records: Make sure clients are informed on how to access their midwifery records and ensure that records are stored and transferred in compliance with the *Personal Health Information Protection Act, 2004* (PHIPA).
- Collaboration: it is a standard of practice for midwives to provide accurate information to, and collaborate with, the care provider receiving the transfer of care. This includes documenting any mitigation strategies that were offered to the client in order to reduce harm or potential health risks.

By adhering to these guidelines, midwives contribute to an effective transition for their clients, and safeguard client health.

Potential Scenarios and Guidance

Distrusting the Midwife's Competency and/or Client Declines Aspects of Care

Clients may question a midwife's competency and suggest that they would feel more comfortable receiving care from another midwife or health care provider. A midwife should listen to their client's concerns and attempt to address them. For example, a failure to communicate the rationale for a midwife's recommendation to manage a certain aspect of the client's care may be the reason why the client does not trust the midwife. If this can be remediated, the midwife-client relationship can continue. However, if a client suggests that their trust in the midwife's knowledge, skill, and judgment has been undermined and the midwife has been unable to remediate the client's concerns, the midwife may consider whether offering to transfer the client's care to another midwife or health care provider is reasonable. A client is the primary decision maker in their care and can choose to end the midwife-client relationship at any time. A midwife must respect the client's choice.

It is not appropriate to end a midwife-client relationship solely because a midwife does not agree with the client's choice or because the client declines a midwife's recommendation for care management. In these situations, midwives must provide information so that the client is informed, supported in their decision-making process, and allowed adequate time for decision-making. The midwife should provide and document all necessary information about proposed

treatments, including benefits, risks, alternatives, and consequences, respecting the client's right to voluntary consent or refusal of treatment. Midwives should consider if ending the midwife-client relationship is reasonable.

Risk of Harm and/or Inappropriate Behaviour

In some cases, a client and/or their support person(s) may pose a risk of harm to the midwife, other midwives, midwifery students, employees of a midwifery practice, and/or other clients and the public, such as by being physically violent. In such cases, the midwife may consider if immediately ending the midwife-client relationship is appropriate.

Midwives are also reminded that if they have reasonable grounds to believe that another person is likely to cause severe bodily harm, they may have a duty to warn appropriate people (e.g., subject of the threat and the police) of the risk. In such a situation, a midwife would also be permitted to disclose personal health information to prevent a significant risk of serious bodily harm².

In some cases, the behaviour of a client and/or their support persons can result in harm to the midwife, other midwives, midwifery students or employees of the midwifery practice. For example, if a client or a client's support person repeatedly swears at a midwife or makes demeaning or racist comments, a midwife may feel unsafe. Midwives are not obligated to endure abusive behaviour and have the right to consider ending the midwife-client relationship if abuse occurs. Midwives who are practice owners also have a duty to manage their practice in a way that supports the physical and mental well-being of all individuals involved in client care.

Inappropriate behaviour includes crossing professional boundaries, such as a client making sexual advances or comments of a sexual nature to a midwife. Midwives must determine if such behaviour prevents their ability to provide safe care to a client. In these circumstances, the midwife may consider whether ending the midwife-client relationship is reasonable.

After a Report to Children's Aid Society is Made

The *Child, Youth and Family Services Act, 2017* requires midwives to report suspected child abuse and/or neglect to the Children's Aid Society (CAS). In cases where a midwife must exercise this duty, trust between the client and midwife may be impacted, and ultimately break down. Midwives should ensure that other midwives directly involved in the client's care are aware of the report being made.

Where possible, midwives should attempt to maintain trust with the client by:

- Contacting the client prior to making a report to CAS and advising the client of the midwife's legal obligation to make the report.
- Offering to call CAS together with the client.

² PHIPA, section 40

Clients may initiate a termination of care with their midwife following a report to CAS. If a client terminates care, a midwife must adhere to the Professional Standards and collaborate with the most responsible provider, when possible, after a transfer of care takes place.

A midwife may determine that terminating the midwife–client relationship following a report to CAS is necessary. However, in this circumstance, the midwife must also consider if the termination is appropriate given the vulnerable position of the client.

The general obligations as set out in the above section entitled *Obligations When Ending the Midwife–Client Relationship* must also be followed.

Suspension, Revocation, or Inactive

A midwife who is suspended, revoked, or moves to the inactive class should inform the necessary individuals and entities of their restrictions, including clients, practice partners, colleagues, and hospitals and birth centres where a midwife holds privileges.

A midwife’s obligations in this scenario are as set out in the section entitled *Obligations When Ending the Midwife–Client Relationship*.

If a midwife is suspended, revoked, or is in the inactive class, they are not permitted to practise midwifery.

Ceasing to Practice, Leave of Absence, and Relocation

When a midwife ceases to practice permanently or for a period of time, or relocates, the midwife must take reasonable steps to ensure their client(s) are given notice and that they have access to care.

When a midwife who is a practice owner permanently closes their practice, failing to give appropriate notice to each client may constitute professional misconduct. In this circumstance the practice owner(s) are ultimately responsible for providing continuity of care or making alternative arrangements with appropriate notice.

A midwife’s obligations in this scenario are as set out in the section entitled *Obligations When Ending the Midwife–Client Relationship*.

Recommended Communication Practices

Effective communication with clients that aligns with the Professional Standards for Midwives is critical for safely concluding services. It is important to maintain professionalism throughout this process and to collaborate with the client, when possible, to arrange alternative services. Midwives play a pivotal role in minimizing disruptions and promoting the ongoing well–being of their clients in the course of discontinuing services.

- **Direct Communication:** Communicate with the client directly, when it is safe to do so, either in person or over the phone, to advise them of the decision to end the midwife–client relationship and the reasons for doing so. The client may not agree with this decision; therefore, it is important to make efforts to help the client understand why their care is being discontinued or transferred to another health care provider. A client

should understand what arrangements for alternate care have been arranged. For example, the midwife must tell the client if they need to contact the alternate care provider to arrange their care or provide consent to the midwife to do so on their behalf.

- **Written Confirmation:** Provide written confirmation of the termination of the care, taking reasonable steps to ensure that the client receives the information. The communication should include a clear affirmation and rationale for the decision, any directions or information the client would need to seek services elsewhere, steps taken to transfer care, and any other relevant information. Retain a copy of the communication in the client's record.

Conclusion

Ending the midwife-client relationship is a significant decision that must be approached with care and consideration. While this guideline provides valuable information and general advice to support midwives in understanding and implementing their professional obligations, it may not cover all possible scenarios or address every individual circumstance. The College recommends that all midwives review the Professional Misconduct Regulation, the Professional Standards for Midwives and the Record Keeping Standard to reinforce the expectations of midwives set out in this document.

For any questions or concerns regarding the professional obligations involved in ending the midwife-client relationship, midwives are encouraged to seek guidance from the Professional Practice Advisor at practiceadvice@cmo.on.ca or by calling 416-640-2252. For advice specific to their situation, midwives can reach out to the Association of Ontario Midwives or consider obtaining legal advice for further assistance.



College of
Midwives
of Ontario

Ordre des
sages-femmes
de l'Ontario