

**Criteria for Reappointment
(Provisional/Active Staff)**

Midwives will meet the following criteria for reappointment to the Department of Midwifery:

- Full registration and in good standing with the College of Midwives of British Columbia (CMBC);
- Evidence of current liability insurance coverage;
- Demonstration of triennial completion of an approved Fetal Health Surveillance course;
- Completion of required PHSA and/or PHC Quality Safety courses;
- Demonstration of attendance at a minimum of 70 per cent of monthly department business meetings, and 50 per cent of BC Women's Hospital (BCWH) and/or Providence Health Care, St. Paul's Hospital (SPH), Medical Staff Association meetings, in accordance with Medical Staff Bylaws and Rules¹;
- Have a minimum of six hospital charts available annually for clients to whom they have provided intrapartum care: identifiers are provided through monthly submission of birth rosters²;
- Continued compliance with Medical Staff Bylaws, Rules and regulations for BCWH and SPH;
- Continued compliance with Department of Midwifery policies, practice guidelines and procedures;
- Demonstration of regular attendance and participation in committee responsibilities;
- Completion of medical records according to the requirements of PHSA Bylaws for medical staff, Children & Women's site, and Medical Staff Bylaws for Providence Health Care, St. Paul's Hospital;
- Be physically located and available within 30 minutes of BCWH and SPH when on call;
- Own/rent clinic space³ within Vancouver;
- Demonstration of physical and mental ability to practice;
- Evidence of completion of a minimum of 35 credits continuing medical education (CME) per calendar year;
- Attendance at a minimum of five rounds presentations per calendar year;
- Have UBC clinical faculty appointment (approved or in process).

¹ Departmental exception for members with privileges at both BCWH and SPH, allowing members to identify a primary hospital and attend a minimum of 50% of MSA meetings at that hospital only, to meet this requirement. Members are expected to read all MSA meeting minutes from their secondary hospital to stay current with medical staff affairs at that site.

² For quality chart audit. Midwives who do not have a minimum of six hospital births for review may provide patient information for charts where the midwife provided the majority of intrapartum care but did not attend the actual delivery.

³ To support flexibility in practice, intra-department locums are considered to rent clinic space under the terms of their locum agreements.

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Department members seeking reappointment are aware of and consent to the following QAI chart review policies:

- Random audit of five charts every three year period, per the In-depth Review process;
- Audits of charts as determined by the Department Head following an independent request, Incident or PSLS Report, Communication Record, or formal complaint;
- Review of additional charts, if any, which are pertinent to the review of any specific case, including audits of charts of selected clinical outcomes as outlined in the QAC Reportable Outcomes document.