

	Z20	<i>EMS Branch / Office of the Medical Director</i>
	2015-04-23	<b>Home Births &amp; Midwives</b>

Midwives operate in Manitoba under the Midwifery Act and Regulation to the Midwifery and Consequential Amendments Act.

EMS personnel may be called to a home birth or health care facility where a midwife is in attendance:

- when attending a home birth with a midwife present, EMS personnel should obtain the midwife's name and the midwife's assistant's name, and record them on the patient care report

Each region may have additional policies in place for the interaction between midwives and other health care providers:

- EMS personnel should be current on local policies relating to working with midwives

In planning a home delivery attended by a midwife, the College of Midwives of Manitoba recommends that the midwife involved use their "Standard for Planned Out of Hospital Births" protocol.

- the midwife is responsible for planning for the home birth and this planning must include:
  - identifying the distance to a health care facility capable of performing operative obstetrics
  - access to telephones and other communication resources
  - weather conditions
  - availability of emergency support systems
  - psycho-social support factors
- the midwife must also ensure that a back-up plan is in place in the event of an emergency. The back-up plan must include:
  - presence of an adequately trained second birth attendant is present at each home birth
  - making prior contact with:
    - local emergency medical service
    - nearest hospital or health care facility capable of dealing with an obstetrical emergency
  - ensuring satisfactory transport service for mothers and infants can be initiated within 30 minutes
  - ensure a satisfactory means of communication is available

The College of Midwives of Manitoba recommends that the midwife should pre-register the home birth with Emergency Medical Services if:

- the birth is to occur in a location at a distance of at least thirty minutes journey from a hospital with surgical facilities, using a method of transportation ordinarily used for health care purposes in the area
- the mother lives in a location with difficult or obscure access

The College of Midwives of Manitoba recommends that the midwife:

- provide written notification of a planned home birth to the appropriate ambulance dispatch office when the mother has reached 37 weeks gestation
- provide written registration of a planned home birth to the appropriate ambulance dispatch office within 48 hours scheduled date of the birth

In most instances, the midwife will take the lead role in delivering the baby:

- EMS personnel will be called to transport the mother and baby to an appropriate health care facility should the need arise

If there are complications associated with the delivery, the midwife may request EMS personnel to assist with the delivery and transport the mother and baby to a health care facility.

- EMS personnel should assist the midwife within the limits of their occupational competencies, level of training, and protocols
- EMS personnel are responsible for providing emergency care for the mother and baby when the care required is beyond the scope of practice of the midwife, this includes but is not limited to:
  - seizures
  - cardiac arrest
  - trauma
  - shock

Under normal circumstances, the midwife must arrange for a second birth attendant to assist in the home delivery.

EMS personnel are responsible to assume care of either the mother or newborn if a second birth attendant is not present or the condition of either mother or baby is compromised:

- if the patient's condition requires interventions outside the scope of practice of the midwife but within the practice for the EMS personnel, EMS personnel should initiate treatment as per the Patient Care Map
  - EMS personnel should assist the midwife to care for the patient(s) within the EMS personnel's scope of practice

If transport is required for either or both the mother and baby:

- the appropriate personnel should accompany the most critical patient in the ambulance
- the midwife may elect to accompany the most critical patient and assist with treatment en route
- if one patient is transported without the midwife in attendance, the EMS personnel should treat as per the appropriate Patient Care Map

If EMS personnel are confronted with a situation where roles and responsibilities are unclear, EMS personnel may avail themselves to physician on-line medical control (if available).