

# **North American Registry of Midwives**

## **2010 Annual Report**

### **Contributing writers:**

Shannon Anton LM, CPM

Ida Darragh LM, CPM

Miriam Atma Khalsa CPM

Carol Nelson LM, CPM

Brynne Potter CPM

Debbie Pulley CPM

### **Compiled by:**

Tina Williams

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This annual report can also be found on the web at [www.narm.org](http://www.narm.org).

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**North American Registry of Midwives**

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# Board Members 2010

## NARM Board of Directors

**Ida Darragh LM, CPM**

*Chairperson  
Testing*

**Shannon Anton LM, CPM**

*Vice-Chairperson  
Accountability*

**Carol Nelson LM, CPM**

*Treasurer  
Applications*

**Debbie Pulley CPM**

*Secretary  
Public Education & Advocacy*

**Brynne Potter CPM**

*Newsletter*

**Miriam Atma Khalsa CPM**

*Policies and Procedures*

**Elan McAllister**

*Public Member*



*L-R: Shannon, Miriam, Elan, Debbie, Brynne, Ida, and Carol*

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## 2010 NARM Executive Summary

*Ida Darragh CPM, Chairperson*

The North American Registry of Midwives (NARM) is the leading certification agency for direct-entry midwifery in the United States. The NARM Certification credential and/or the NARM Written Examination are required for licensure in most of the states that license direct-entry midwives and in all the states that license midwives specifically for out-of-hospital birth. NARM's midwifery certification is a state-of-the-art, legally defensible certification program. NARM's CPM certification program is accredited by the National Commission for Certifying Agencies (NCCA), the accrediting division of the Institute for Credentialing Excellence (ICE) formerly known as the National Organization for Competency Assurance (NOCA). ICE/NCCA accreditation means that our certification process was reviewed in detail and meets or exceeds the standards set by ICE for certifying agencies. The NARM Board is responsible for overseeing the operations of the certification program,

including processing applications and recertifications, test development and administration, finances, accountability, public education and advocacy, publishing a newsletter, and maintaining up-to-date policies and procedures for all departments.

NARM contracts with Dr. Gerald Rosen for psychometric oversight and guidance. NARM maintains a web site ([www.narm.org](http://www.narm.org)) for distributing information to candidates, certificants, and the general public. In 2010, the NARM Test Department, under the direction of Ida Darragh, oversaw the administration of the NARM Skills Assessment to 42 Portfolio Evaluation Process candidates and the Written Examination to 229 certification or licensure candidates (up from 209 in 2009).

NARM presented workshops related to preceptor-apprentice relationships, charting, ethics, statistics, and legislation in Mississippi, Oregon, West Virginia, and Illinois. The NARM Test Department also participated on committees for the Institute for Credentialing Excellence,

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and the Council on Licensure, Enforcement, and Regulation. As chair, Ida also spoke at the annual conference of the American Association of Birth Centers.

The NARM Applications Department is under the direction of Carol Nelson with assistance in evaluating and processing applications by Sharon Wells and Christine Roman. The NARM Applications Department reports that the number of printed applications mailed continues to drop as more applicants choose to download application materials from the web. The total number of applications received in 2010 was 244. One hundred eighty-three new CPM certificates were issued (up from 155 in 2009), and 317 recertifications were issued. The total number of midwives who have received the CPM certification by the end of 2010 is 1828.

Treasurer Carol Nelson reports that NARM is financially solvent. NARM's income is received from NARM application and recertification fees and from test sales to candidates taking the exam for licensure. The total income during 2010

was \$252,934. Normal operating expenses ran \$247,185. The remainder is set aside for future projects such as updating the website, purchasing office equipment, or (in 2011) completing our eligibility review process.

Shannon Anton directs NARM's Accountability Department which handles complaints against CPMs and follows a formal Grievance Mechanism. Complaints are handled first in local peer review and then by the NARM Grievance Mechanism, if needed. This process has worked exceptionally well in the resolution of grievances and in assuring the accountability of CPMs. NARM Accountability received a total of eight complaints in 2010: One complaint was made by a third party and did not have the support of the midwifery client and therefore could not proceed to Complaint Review. One complaint did not proceed due to lack of client record release and participation. A complaint against a CPM applicant was heard by the Board in Complaint Review and resulted in recommendations to the midwife. The 2009 CPM revocation was appealed and addressed by Board consideration

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and legal counsel, and the revocation of the midwife's CPM credential was upheld. At the close of 2010 there were open complaints against five CPMs; each will be addressed in 2011. Since 1995, NARM has addressed 27 complaints through the accountability process. Four CPM credentials have been revoked.

Debbie Pulley, in Public Education and Advocacy, also acts as secretary to the board. She handles hundreds of phone calls and e-mails every month from CPMs, candidates, and the general public. She keeps the board minutes of the weekly board conference calls and any other board meetings. Debbie manages the web site and all of NARM's documents including the Application Packet and the Candidate Information Bulletin.

Elan Vital McAllister is the public member of the NARM Board. Elan's responsibility on the board is to represent the public rather than the profession. As a doula and childbirth advocate, Elan has experience in advocating for mothers and families in the maternity care system.

Brynne Potter is responsible for coordinating multiple tasks under the heading of Special Projects. She maintains a weekly summary of the status of ongoing projects and brings together the articles that are needed for the newsletter. She coordinates the application and approval process for out-of-country clinical sites. Brynne oversaw the completion of NARM's new web site in 2010 and initiated the Eligibility Review process for the certification requirements. More information on the Eligibility Review is available on the web at [www.narm.org](http://www.narm.org).

Miriam Khalsa is responsible for keeping records of all policy decisions made by the board during our weekly phone calls and twice-yearly board meetings. She organizes all current policies that define how NARM operates. Miriam also handles the Skills Assessments for the NARM Test Department.

In 2010, NARM continued working with five other organizations to support the inclusion of CPMs as approved Medicaid providers in federal healthcare legislation. The other organizations

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working together toward this goal are the Midwives Alliance of North America, the National Association of Certified Professional Midwives, the Midwifery Education Accreditation Council, Citizens for Midwifery, and the International Center for Traditional Childbearing. This work is a long-term project that began in 2009.

In 2010, NARM representatives participated in public education about midwifery in exhibit booths at these conferences: The Midwives Alliance of North America (MANA), the American Public Health Association (APHA), the American College of Nurse-Midwives (ACNM), and the National Conference of State Legislators (NCSL). NARM representatives attended or presented at additional conferences for The Coalition for Improving Maternity Services (CIMS), the American Association of Birth Centers, the Institute for Credentialing Excellence (ICE), and the Council for Licensure, Enforcement, and Regulation (CLEAR). Ida Darragh also represents NARM as an elected

commissioner on the National Commission for Certifying Agencies.

A major accomplishment for NARM in 2010 was the beginning of a process to evaluate the eligibility criteria for obtaining the credential. Our knowledge and skills, which must be verified and documented during training and which are the basis of the Skills Assessment and Written Exam, are determined by a Job Analysis. The numbers of clinical experiences were determined when the credential was created through a series of Task Force meetings. NARM has decided to review the numbers and definitions of clinical experiences and to use a process similar to the Job Analysis. A focus group of 100 CPMs and others representing various stakeholder groups met on October 13 in Nashville, TN, to review and respond to a listing of the current clinical requirements and some possible changes. Reports from that meeting were evaluated by the NARM board. The next steps, to take place in 2011, will be to develop a series of demographic questions and a survey of attitudes toward training which will be sent to all CPMs. From the

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results of that survey, NARM will determine if any changes should be made to the eligibility requirements.

Another major accomplishment in 2010 was the re-design of the NARM website. All materials previously on the website were reviewed and revised when needed. NARM hired a web designer to create a more user-friendly platform for the delivery of information. The new website was launched in early 2011.



## NARM Income and Expenses

*Carol Nelson LM, CPM, Treasurer*

The year 2010 was a good year for NARM from a fiscal standpoint. We ended the year with money in the bank and all expenses paid. The certification process has taken a lot of financial resources and continues to take more as we grow in numbers. Our total income for 2010 was \$252,934. This includes a \$5,700 grant from the Foundation for the Advancement of Midwifery (FAM). The grant was specifically for the face-to-face Focus Group Meeting for the Eligibility Review of the NARM Process.

NARM's main sources of income are from Test Sales and Applications. Applications include requests for processing applications, certifications, and recertifications. Our income from the Applications Department in 2010 was \$201,345. Test Sales are from the states that use the NARM exam in their Licensures/Certification process. Income from the Test Department in 2010 was \$44,402. Occasionally we will get a grant for

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a specific project such as the 1995 or 2001 Job Analysis. A Job Analysis every five years is necessary to remain state of the art in testing. In 2010 we received a \$5,700 grant from The Foundation for the Advancement of Midwifery (FAM) for the first phase of the Eligibility Review Process. We also have income from brochure sales, frame sales, and interest. That total in 2010 came to \$1,487.

As the Treasurer for NARM, I believe meeting current expenses and planning for anticipated future expenses is the only fiscally responsible way to run our organization. We need to not only cover current costs, but we must think ahead to future projects, both mandated and innovative, and must therefore ensure that reserve funds are available for those projects. The 2008-09 Job Analysis was one such project, as was buying NARM's new applications building. To remain state of the art in testing, this is a must. Other projects include continued work on our test development such as Item Writing and Cut Score Workshops, recertification work with the Qualified Evaluators and the Skills Assess-

ments, education, advocacy, and participation in national and international midwifery initiatives. In 2010 the beginning of the NARM Eligibility Review Process was a special project that we started. The Eligibility Review Process is continuing in 2011.

Our expenses are set to allow for an annual increase in net assets so NARM establishes a reserve fund for mandated large projects such as the five-year job analysis and online item writing and cut-score workshops. A few of our main expenses are: Consultants that run our Applications Office and the Testing Company we work with, Printing, Postage, Telephone, Conference Fees (going to conferences to promote CPMs and the Midwives Model of Care, education and advocacy initiatives), Dues/Membership in organizations such as the Institute for Credentialing Excellence (ICE) and Council on Licensure, Enforcement, and Regulation (CLEAR), Insurance, Legal Fees (to be sure we stay Legally Defensible), Office Expenses and Supplies. Expenses in 2010 came to \$247,185.

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North American Registry of Midwives uses Quickbooks for accounting.

We are looking forward to NARM's continued growth in 2011.

With the growth of our certification process and more Certified Professional Midwives each year, we feel honored to be doing our part to move midwifery forward and to promote the Midwives Model of Care as a viable option for women and families through out North America.

## North American Registry of Midwives Income and Expenses- Year End 2010

### Income

|  |           |
|--|-----------|
| Applications . . . . .   | \$201,345 |
| Test Sales . . . . .   | 44,402    |
| Grant, FAM for Eligibility<br>Review . . . . .                 | 5,700     |
| Other Income( Brochures,<br>frames, interest income) . . . . . | 1,487     |

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Total Income . . . . . \$252,934

### Expenses

|                        |         |
|------------------------|---------|
| Bank Charges . . . . . | \$1,423 |
|------------------------|---------|

### Conferences and Meeting

|  |          |
|--|----------|
| Fees . . . . .                                 | 29,414   |
| Consultants/Contract Labor . . . . .           | 57,765   |
| Depreciation Expense . . . . .                 | 1,772    |
| Donations: . . . . .                           | 850      |
| Dues and Memberships . . . . .                 | 5,590    |
| Eligibility Focus Group . . . . .              | 4,352    |
| Information and Technology . . . . .           | 3,481    |
| Insurance . . . . .                            | 5,431    |
| Legal Fees . . . . .                           | 10,877   |
| Office Expense . . . . .                       | 10,890   |
| Postage/shipping . . . . .                     | 10,427   |
| Printing . . . . .                             | 7,745    |
| Refund . . . . .                               | 700      |
| Supplies . . . . .                             | 12,370   |
| Telephone . . . . .                            | 9,528    |
| Testing Expenses                               |          |
| Testing Company . . . . .                      | 32,180   |
| Proctors . . . . .                             | 2,825    |
| QEs . . . . .                                  | 3,225    |
| Total Testing Expenses . . . . .               | \$38,230 |
| Travel/Hotel/Food . . . . .                    | 7,730    |
| Board Meeting Travel and<br>Expenses . . . . . | 17,330   |
| Utilities . . . . .                            | 4,140    |
| Web site development . . . . .                 | 7,140    |

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Total Expenses . . . . . \$247,185

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Retained Earnings . . . . . 5,749

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Total expenditures  
for the year . . . . . \$247,185



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## NARM Accountability Committee

*Shannon Anton LM, CPM,  
Director of Accountability*

NARM Accountability Committee follows Complaint Review and Grievance Mechanism policies to address complaints against CPMs and CPM applicants. Legal advice is sought when appropriate. The NARM Board receives regular updates regarding the activities of Accountability Committee.

NARM accountability processes work to address concerns regarding competent midwifery practice. The NARM Board reserves the right to evaluate, in its sole discretion, the appropriate application of NARM's Complaint Review and Grievance Mechanism. Complaints received by the NARM Board that do not involve issues relating to competent midwifery practice will not be addressed through NARM Complaint Review or Grievance Mechanism.

NARM will not begin the processes of Complaint Review or Grievance Mechanism with a

CPM who is also facing regulatory investigation or civil or criminal litigation. NARM will apply these processes only after such proceedings are concluded. It is the responsibility of the complainant to notify NARM within 90 days of the conclusion of proceeding.

Participation in peer review or peer review education is mandatory for CPM recertification. The CPM credential is renewed every three years. A CPM with inactive or expired status is bound by all policies regarding NARM Community Peer Review, Complaint Review, and Grievance Mechanism. Failure to respond to a complaint will result in revocation of the credential.

Participation in NARM Complaint Review or Grievance Mechanism is mandatory for a CPM applicant named in a complaint.

Since the beginning of the CPM credential in 1995, this committee has received twenty-seven formal (written) complaints appropriate for NARM accountability processes. Four CPM credentials have been revoked.

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The outcome of two complaints heard in Complaint Review found no fault with the CPMs; in one of these instances the consumer was dissatisfied with that outcome and filed a second complaint to initiate the Grievance Mechanism. The outcome of the Grievance Mechanism proceedings reached the same conclusion.

Seven midwives have had complaints that proceeded to the Grievance Mechanism. Of those, four had their CPM credentials revoked. Revocations occurred in 2000, 2003, 2004, and 2009.

NARM Accountability received a total of eight complaints in 2010:

One complaint was made by a third party and did not have the support of the midwifery client and therefore could not proceed to Complaint Review. One complaint did not proceed due to lack of client record release and participation.

A complaint against a CPM applicant was heard by the Board in Complaint Review and resulted in recommendations to the midwife. The 2009 CPM revocation was appealed and addressed by Board consideration and legal counsel, the revocation of the midwife's CPM credential was upheld.

At the close of 2010 there were open complaints against five CPMs; each will be addressed in 2011.



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## Test Department

*Ida Darragh LM, CPM,  
Director of Testing*

### Major Tasks of the Test Department in 2010 included:

1. Maintaining yearly renewal of NARM's accreditation by the National Commission of Credentialing Agencies (NCCA), the accrediting arm of the Institute for Credentialing Excellence (ICE) formerly the National Organization for Competency Assurance (NOCA).
2. Presenting the Legislative Workshop or workshops on Preceptor-Apprentice Relationships, Charting for Midwives, Midwifery Ethics, MANA Statistics, or How to Become a CPM in Mississippi, Oregon, West Virginia, and Illinois.
3. Working with the CPMs in states considering licensure. NARM board members regularly participate in e-mail and telephone discussion with midwives in states seeking licensure and sometimes visit mid-

wives, regulatory agencies, and legislators in those states. We wrote letters regarding midwifery legislation and/or spoke on the scope of practice of CPMs for legislative committees in South Dakota, Idaho, Illinois, North Carolina, and Colorado.

4. Training and recertifying NARM's Qualified Evaluators (QEs), who administer the NARM Skills Assessment to the PEP candidates. A QE workshop was held in Mississippi in June, 2010. Our total number of active QEs at the end of 2010 was 98.
5. Administering the NARM Skills Assessment to 52 PEP candidates and the NARM Written Examination to 209 candidates.
6. Attending the annual NOCA and CLEAR conferences and participating on the NOCA Program Committee and the CLEAR Program Committee and Credentialing and Exam Resources Committee.
7. Completion of the report on the 2008 NARM Job Analysis Survey, done for the first time as a web-based survey.

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## **NARM Testing**

The NARM Skills Assessment was administered to 42 PEP candidates in 2010. The assessment was taken by candidates from 22 states. Miriam Khalsa oversees the administration of the NARM Skills Assessments.

The NARM Written Examination was given to 229 candidates from (up from 209 in 2009) in 37 states and three Canadian provinces. Seventy nine percent took the exam to complete the CPM certification process, and 21% took the exam for state licensure, though many who receive the CPM apply for licensure and many who receive licensure then apply for the CPM. Eleven states currently administer the NARM Written Exam as a state licensure exam. These states are: Alaska, Arkansas, Arizona, California, Colorado, Louisiana, Montana, New Mexico, South Carolina, Texas, and Washington. An additional fifteen states require the CPM or the Exam portion of the CPM for legal practice: Delaware, Florida, Idaho, Maine, Minnesota, Missouri, New Hampshire, New Jersey, Oregon, Tennessee, Utah, Vermont, Virginia, Wisconsin, and

Wyoming. NARM currently offers the Written Examination at the eleven state agencies and at twelve University Testing Centers in California, Florida, Idaho, Iowa, Kansas, Massachusetts, Maryland, Ohio, Oregon, Tennessee, Utah, Vermont, and Virginia.

In 2010, the pass rate for the Written Examination was 79%.

## **Test Development**

Test questions are written by teams during the Item Writing workshops, and many writers continue to submit questions throughout the year. All questions are reviewed again by two teams of item writers. Final reviews are done by the NARM Board. Forms J and K of the NARM Exam were administered in 2010.

## **NARM Participation in ICE and CLEAR**

The NARM Test Department and Board of Directors participates in the national conferences

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of both the Institute for Credentialing Excellence and the Council for Licensure, Enforcement, and Regulation. In 2010, Director of Testing ,Ida Darragh, attended the NOCA conference in Atlanta in November and the CLEAR business meeting in New Orleans in January, and CLEAR general convention in Nashville in September. In addition, Ida served on the ICE program committee and on CLEAR's Exam Resources and Advisory Committee and Credentialing and Examination Issues committee. Ida continues to serve on the National Commission for Certifying Agencies (NCCA), the accrediting arm of ICE.

## Test Department goals for 2011 include:

- Training and working with more Item Writers to create a larger databank of test questions which will form the next version of the NARM exam (form L). Finalization of the Spanish translation of form K will be completed in 2011.

- Continue working with ICE and CLEAR, maintaining our certification with ICE, and serving on the NCCA commission.
- Presentation of Item Writer workshops and Qualified Evaluator workshops.
- Participation on the weekly NARM Board phone calls and annual meetings.
- Scheduling of NARM Skills Assessments as needed, and of the NARM Written Examination on the third Wednesdays of February and August at regional sites and again at the annual MANA conference.

## NARM Job Analysis Report

The North American Registry of Midwives (NARM) has sponsored the Certified Professional Midwife (CPM) examination for direct-entry midwives since 1996. Although the CPM is a certification examination, it is endorsed and used for licensure or legal practice decisions in 25 jurisdictions. The content of the earliest examinations was based on a Job Analysis conducted in 1995. A subsequent analysis was

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conducted in 2001, and the test specifications were revised at that time. In 2008, the NARM Board of Directors began its third survey-based Job Analysis. The purpose of the analysis was to obtain up-to-date information about the current state of the practice of midwifery in order to revise the test specifications for the CPM examination. That Job Analysis was completed in 2009, and the changes to the test specifications were implemented in 2010.

Most of the changes in the specifications are minor changes that reflect a reorganization of the knowledge and skills list or an expansion of the explanation of the skill. For example, complete and accurate charting has been required as part of the PEP evaluation but is now included on the skills list, as is evaluating the effect of the support team or visitors and providing an opportunity for verbal or written feedback from clients. The few new items are information relating to Group B Strep and performing or referring for a hearing screening for the newborn.

One change that has been made to the requirements for certification based on the results of this survey is that, beginning in January, 2011, all applicants and all CPMs who apply for recertification must be certified in Neonatal Resuscitation in addition to Cardio-Pulmonary Resuscitation.

A complete report on the Job Analysis survey is available on the web at [www.narm.org](http://www.narm.org), under “About NARM.”



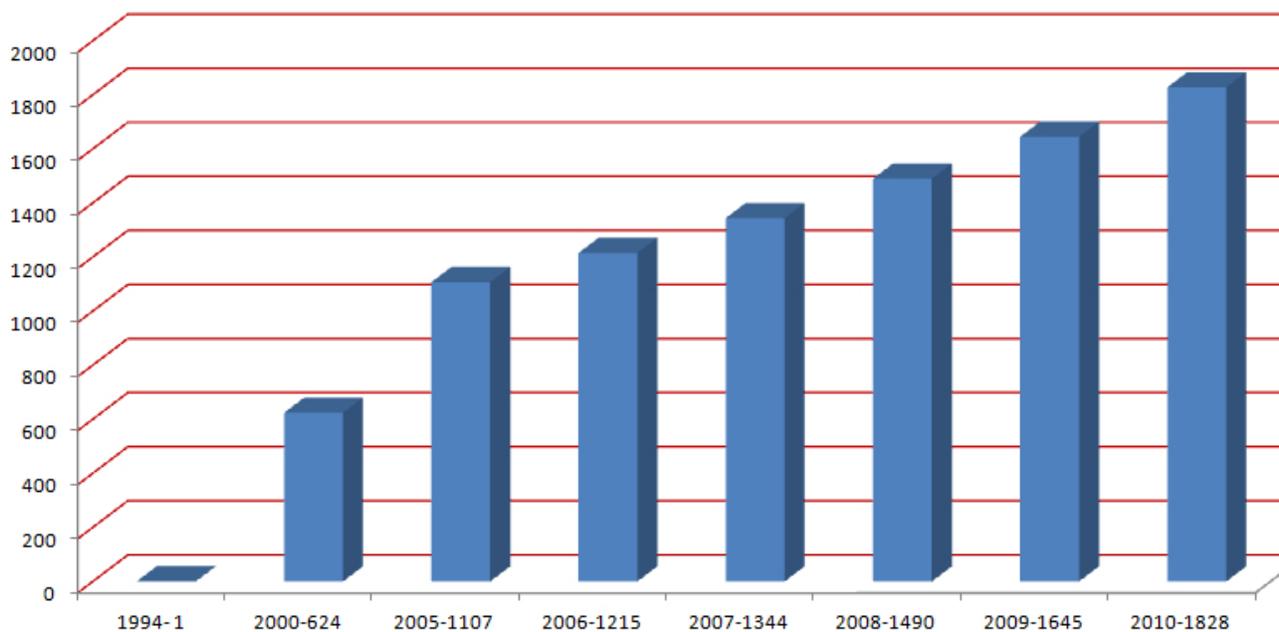
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## Applications

*Carol Nelson LM, CPM-TN,  
Director of Applications*

- In the year 2010 the NARM Applications Department received a total of 244 applications.
- Fifty applications were sent out by mail to people requesting application packets.
- One hundred fifty-eight applicants took advantage of downloading our online application.
- One hundred eighty-three new CPM certifications were issued in 2010.
- A total of 1828 CPM certifications were issued by the end of 2010.

## Total number of CPMs by year

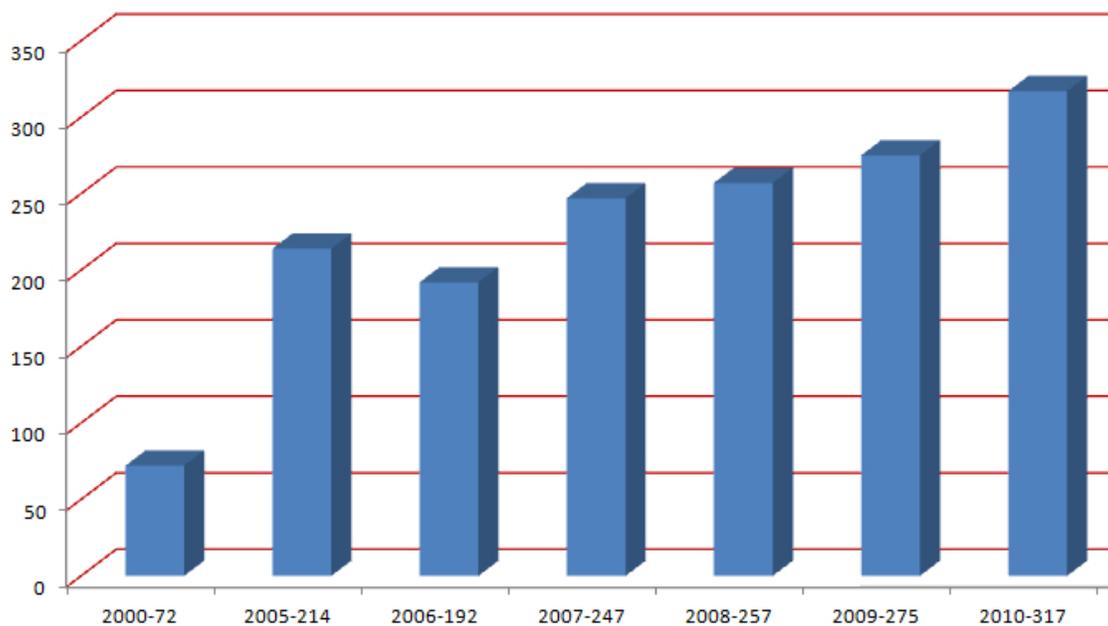


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## Recertification

Three hundred and seventeen recertifications were issued in 2010. The Applications Department has a Recertification Table to keep track of incoming and outgoing recertifications. A reminder letter is sent to all CPMs to remind them that their CPM Credential is coming up for recertification. Another reminder is sent after the expiration date. It is the CPM's responsibility to keep track of sending in her recertification and to keep the Applications Office updated on any change of address.

## Total number of Recertifications by year



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## Inactive Status

In 2010 86 people were in the Inactive Status category, 26 for the first time.

Inactive CPMs will continue to receive the *CPM News* and may recertify within a six year period. Inactive status must be established within 90 days of the CPM expiration and is maintained annually for up to six years. To reactivate, they must submit all required information and fees including continuing education units.

## Expired CPMs

CPMs whose certification has been expired for more than 90 days or who have not declared inactive status will be given expired status and will be required to follow the new policy on reactivation in order to be recertified. All of NARM's policies regarding recertification, certification status, or reactivation are available on the web at [www.narm.org](http://www.narm.org).

## Audits

The Applications Department generates random audits from applicants and CPMs recertifying. Items required are Practice Guidelines, an Informed Consent document, and an Emergency Care Plan. Occasionally we will also request charts for review. The Applications Department audited 66 people who were recertifying in 2010. These were from 26 different states and one from Canada. Fifty-nine applicants were audited randomly or for discrepancies in some part of their application. If a new applicant is audited, they will be asked for Practice Guidelines, an Informed Consent document, an Emergency Care Plan, and the three charts for their continuity of care births.

## Finances

The Applications Department receives fees for application packets, CPM applications, recertifications, name changes, extra certificates or wallet cards, and selling brochures. In 2010 a total of \$ 201,806 was processed through the Applications Department.

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## Special Projects

*Brynne Potter, CPM, LM  
Special Projects*

Special Projects took on a whole new dimension this year with the initiation of two new initiatives and the completion of a third.

1. The first initiative was the creation of an Out of Country Clinical Site Application and Approval Process. The Midwives Model of Care (MMOC) is the foundation upon which the CPM credential is based. As evidenced by the NARM Job Analysis and both the Written and Skills test descriptions, all documented training for entry-level midwives is expected to be within this model. Globally, midwives work in many settings both to provide this level of care to women and babies and also to train others in the benefits of this evidenced-based approach to maternity care. Sometimes training opportunities for students are not within the MMOC but still provide beneficial opportunities for

both students and the women they serve. NARM recognizes that births in these settings contribute to the midwife's overall experience, and NARM encourages these experiences as a supplement, but not substitute, for meeting the required clinical experiences as a PEP candidate.

Midwifery students seeking certification from the North American Registry of Midwives may seek training in clinical sites outside of the U.S. and Canada (OOC sites). A qualified preceptor who is physically present in the room with the student when clinical skills are performed must supervise students. Births attended by the student may count toward NARM certification requirements as Active Participant births if the student is able to perform various midwifery skills under the supervision of the preceptor and if the preceptor is able to give instruction and feedback to the student before, during, and after the clinical experience. Births may count as primary births only if specific conditions

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have been met and if the clinical site has received approval from NARM. Approval by NARM as an out-of-country clinical site does not constitute an endorsement of a particular site based on setting or conditions such as accommodations, sanitation, or cultural customs, but rather as verification that the clinical training students receive is in accordance with the NARM guidelines for primary under supervision and the Midwives Model of Care.

2. The second initiative was the first step of a comprehensive review process of Eligibility Requirements for application of the CPM. The first step was to hold a Focus Group of over 100 stakeholders to give feedback on proposals developed by the NARM Board for potential changes to clinical and education requirements for eligibility to sit for the NARM exam. See a review of the Focus Group on our Website as <http://narm.org/focus-group-summary>.

3. The third initiative was the complete overhaul of the NARM Web site. This task was completed in 2010 with a final launch at the beginning of 2011. The new site brought much-needed updates, such as a search feature and audience focused landing pages.

NARM has moved to email format for short news alerts and will be looking for new board members to maintain the ongoing paper newsletter in the future.



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## Public Education & Advocacy

*Debbie Pulley LM, CPM  
Director of Public Education & Advocacy*

The Public Education and Advocacy director handles phone calls generated through the toll-free NARM Information phone number. Calls include requests for information on how to become a CPM, application questions, and recertification questions. They also receive calls seeking general information about the NARM process or requests for midwife referrals. This office also handles press interviews.

The NARM Candidate Information Bulletin is updated regularly on the web and in print.

Public Education and Advocacy also includes participation in conferences such as the Midwives Alliance of North America (MANA), the American Public Health Association (APHA), the American College of Nurse-Midwives (ACNM), the National Conference of State Legislatures (NCSL), the Coalition for Improving Maternity Services (CIMS), the Institute for Credentialing Excellence (ICE), and the Council for Licensure, Enforcement, and Regulation (CLEAR).



# Reports 2010

## Policies & Procedures

*Miriam Atma Khalsa, CPM*  
*Director of Policies and Procedures*

The NARM board regularly reviews existing policies for the purpose of clarifying the information in a previous policy or for establishing new policy.

### New policies in 2010

- CPR for Health Care Providers will now be required, and basic CPR will not be accepted after December 31, 2012. Online CPR will not be accepted, as a hands on component is required.
- The board approved adding to the requirement that preceptors for PEP applicants be certified with additional experience beginning in June 2010, and CPMs who have had their credential revoked may not act as a preceptor.
- NARM drafted new policy for students testing before graduation from a MEAC accredited school.
- The board also added the requirement for experienced midwives to document 20 initial exams, and all applicants will now be required to submit charts for COC (continuity of care) births.
- The board approved adding an expedite fee for Skills Intent forms received less than two weeks before the exam.
- NARM also approved adding one year to the complaint timeline if the complaint is being reviewed by the state.
- NARM wrote a position statement on Shared Decision Making and Informed Consent and added to the policy and requirements for Informed Consent Documentation.
- NARM approved a change to the By Laws in regard to how the Directors of the Board are elected.
- NARM has clarified the requirement for currency (ten out-of-hospital births within three years of submission of application).

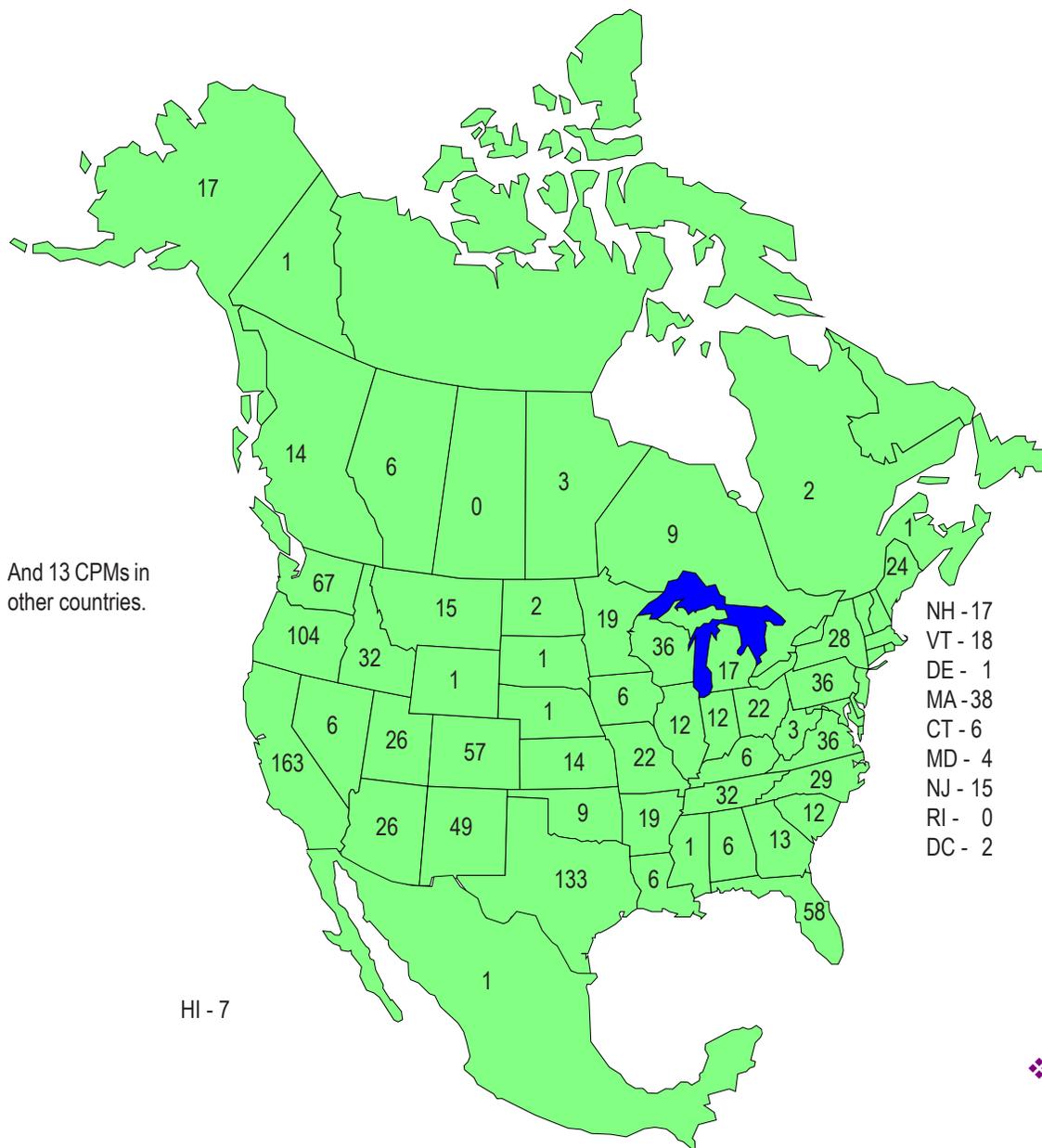
# 2010

- Applications that are complete and without discrepancies will not be held up due to a random audit.
- The board approved PALS to be accepted as well as NRP for certification and recertification.
- The board clarified that OOC (out of country) Clinical Site applications must be filled out and submitted by the Clinical Director or the Director of Students.
- Policy regarding providing notice of revocation of certification to states with licensure for CPMs was amended.
- The board clarified policy on who may refer to themselves as CPM (and there is no such status granted by NARM as “CPM candidate” or “CPM applicant”).



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Following is a map listing the location of CPMs in North America as of December 31, 2010.



# Board Biographies 2010

## Biographies of NARM Board Members

### Shannon Anton LM, CPM

Shannon is an apprentice trained midwife and founding member of the Bay Area Homebirth Collective in San Francisco. She co-founded National Midwifery Institute in 1995 and continues as co-director, program administrator, and instructor. Shannon has served on the board of the California Association of Midwives (CAM). Shannon attended the NARM Certification Task Force meetings as representative of the CAM certification process. She joined the NARM Board in 1993 and currently chairs NARM's Accountability Committee.

Shannon has been with her life partner since 1987. They built their house together in 1998 and continue to live happily in rural Vermont. Shannon was honored in 2004 with the California Association of Midwives' Brazen Woman Award.

### Ida Darragh LM, CPM

Ida has been attending home births in Little Rock, Arkansas since 1982. She is in a midwifery partnership called Birth Works with Mary Alexander. Ida has worked on the political side of midwifery from the onset, beginning with lobbying for the midwifery licensing law in Arkansas in 1983 and continuing in various positions with the Arkansas Association of Midwives and the Midwives Advisory Board of the Arkansas Department of Health.

Ida began her involvement in birth in 1975 as a childbirth educator and taught classes for both home and hospital births for 25 years. She joined the NARM Board in 1998 as the Chair of Public Education and Advocacy and became Director of Testing in 1999. In 2003, she assumed the responsibilities as Chair of the Board. As a representative of NARM, she serves on the Exam Resources Committee of the Council on Licensure, Enforcement, and Regulation; has served on many committees with the Institute for Credentialing Excellence; and is currently

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a commissioner with the National Commission for Certifying Agencies.

Ida graduated from the University of Arkansas at Little Rock in 1971. She has been married to Kramer since 1971, and they are the parents of three children and three grandchildren.

## **Elan McAllister**

Elan was elected to the NARM board in October, 2009, as the incoming public member. She is a birth activist and doula in New York City. She co-founded and is president of a New York City-based consumer advocacy group, Choices in Childbirth. She is also president of the board of The New Space for Women's Health, a not-for-profit working to open a free-standing birth center in Manhattan. She's a co-leader of the Grassroots Advocates Committee of CIMs and co-created that committee's jewel project, The Birth Survey.

## **Miriam Khalsa CPM**

Miriam has been attending homebirths in Massachusetts since 1981. She is a founding member of the Massachusetts Midwives Alliance (MMA) and served on its board in various positions for eighteen years. Currently she co-chairs the MMA Legislative Committee and is working to pass legislation for licensure of CPMs in Massachusetts. Miriam represented MMA on the Partners in Perinatal Health board for the past fourteen years and was the coordinator of the MANA 2002 conference held in Boston.

Miriam has been an instructor for the MMA Basic Course in Midwifery Skills and is a NARM Qualified Evaluator. She has been on the Board of the North American Registry of Midwives since January 2007 serving as the Director of Policy and Procedures and managing the Skills Assessments Exam. Both of her children were born at home with the help of midwives.

# Board Biographies 2010

## **Carol Nelson LM, CPM**

Carol lives in Summertown, TN, with Don, her husband of 36 years. She is the mother of four children, three of which were born at home, and grandmother of seven, all of which were born at home. She has been attending home births since 1972. She is in a midwifery partnership with five other midwives at the Farm Midwifery Center, Summertown. She has been actively involved with midwifery politics since 1977. Carol graduated from Oak Forest Hospital School of Nursing in 1968, was licensed by the State of Florida in 1982 as a midwife. She was on the Board of Directors of the South Florida School of midwifery from 1983 to 1988. She received her CPM in 1995, was actively involved in the Certification Task Force meetings, and was the chair of the NARM pre-approval committee. She has worked on item writing and test development of the NARM Written Exam, Skills Assessment and Qualified Evaluator training, the NARM Eligibility Review Survey, and has been involved in the 1995, 2001, and 2008 Job

Analysis. She has been on the NARM Board serving as the Treasurer since 1997 and Director of Applications since 2003.

She is co-author of the American Public Health Association (APHA) position paper, “Increasing Access to Out-Of-Hospital Maternity Care Services Through State-Regulated and Nationally-Certified Direct-entry Midwives” which was adopted by APHA in 2001. She is co-author of the APHA position paper, “Safe Motherhood in the United States: Reducing Maternal Mortality and Morbidity.” This was adopted by APHA in 2003.

She is currently active in the Maternal Child Health Section representing the profession of Midwifery and Midwifery Educators. She was the program chair for the Maternal Child Health Section of APHA for their Annual meetings for six years. She is co-chair of the Innovations in Maternity Health Services Committee of the Maternal Child Health Section of APHA. This is the committee within APHA that holds the space

# Board Biographies 2010

for “normal birth.” She currently serves on the APHA Governing Council as a representative for the Maternal Child Section. She is also on the “Nominating Committee” for APHA general elections. She is on the Tennessee Council of Certified Professional Midwives. She works as a pro-bono lobbyist for the Tennessee Midwives Association in their legislative efforts.

Since 1997 she has been the MANA public Education and Advocacy chair helping to promote the profession of midwifery and move midwifery forward in the United States.

## **Brynne Potter CPM**

Brynne is a mother, midwife, and community activist. She has two children, ages 14 and 18, who were born at home in Virginia with the aid of midwives. She became a CPM in 2005 and is a partner in Mountain View Midwives, a home birth practice in Charlottesville, VA. Between 2003-2005, Brynne served as coordinator for

the successful grassroots efforts to pass a licensing bill to allow CPMs to provide midwifery services in Virginia. She has held a license to practice midwifery since 2005.

Brynne currently serves as the Public Relations Director for the Commonwealth Midwives Alliance, serving as liaison to the state Board of Medicine which oversees the licensure of CPMs and coordinates the education efforts of state agencies regarding the practice of licensed midwifery. Brynne is a founder and developer of Private Practice, an electronic charting software for midwives.

# Board Biographies 2010

## Debbie Pulley CPM

Debbie has had a home birth practice in Atlanta, Georgia since 1982. Shortly after receiving her CPM certification in 1995, she started working with NARM in the Applications Department. She now serves on the NARM Board as Secretary and is Director of Public Education and Advocacy.

Debbie has been very active in state midwifery politics and serves as President of the Georgia Midwifery Association. Although direct-entry midwifery is not currently recognized by the state, she still is very involved in coalition building. She acts as liaison for the State's Vital Records division and developed the forms currently used by the department for out-of-institution birth registrations. In 2000, Debbie was one of four MANA members selected to serve on the MANA/ACNM Liaison Committee. The committee meets twice a year.

Debbie began attending births in 1970 while living in Hong Kong. She moved to Atlanta in 1971 and married Don in 1973. They have two children and three wonderful grandchildren.



# Job Descriptions 2010

## Chairperson

*Ida Darragh LM, CPM*

- Facilitates weekly Board meeting call
- Facilitates twice-yearly Board meetings
- Maintains contracts with state licensing agencies
- Represents NARM on the MAMA Campaign Steering Committee



## Treasurer

*Carol Nelson LM, CPM*

The by-laws of the North American Registry of Midwives (NARM) state: “The Treasurer shall have charge of all funds of the Corporation. The Treasurer shall see that a true and accurate accounting of all financial transactions of the Corporation is made and the reports of such transactions are presented to the Board of Directors at each of the regular meetings or at special meetings as called”

The Treasurer will:

- Be responsible and keep an accurate accounting of all funds
- Do all of the bookkeeping and accounting of the funds
- Receive and deposits all funds
- Pay all bills as they become due
- Oversee any special funds, such as grants and restricted donations
- Create reports and present them at all regular board meetings, including income and expenses for the year to date, quarterly, end of year, and comparisons of similar time frames
- Create a proposed budget for the upcoming year
- Be prepared at board meetings to advise the board on fiscal matters
- Answer all correspondence, calls, e-mails and questions involving NARM’s finances, including audits.

# Job Descriptions 2010

When extra funds become available, what to do with the extra money is discussed by the Treasurer with the financial committee and then recommendations are made to the whole Board of Directors. The Board of Directors makes decisions about these funds.



## Secretary

*Debbie Pulley CPM*

The secretary is responsible for the following:

- Arranging lodging/meeting space for Board meetings
- Setting the agenda and taking and distributing minutes of all Board meetings and conference calls
- Managing the Board Listserv



## Public Education and Advocacy

*Debbie Pulley CPM*

This department's main responsibilities are to:

- Answer phone calls for the NARM 800 number
- Answer emails
- Send out information.
- Route calls and e-mails to the appropriate departments
- Manage the Board e-mail list
- Keep minutes for Board calls and meetings
- Assist with the *CPM News*
- Oversee webpage updates
- Acts as PR liaison to the press
- Arrange lodging/meeting space for Board meetings
- Assist in formatting and arranging printing for NARM documents.

# Job Descriptions 2010

- Present NARM workshops
- Attend various conventions as an exhibitor for NARM



## Accountability

*Shannon Anton LM, CPM*

The tasks of the NARM Director of Accountability are as follows:

- Answer phone calls regarding accountability issues and questions
- Answer e-mails sent from [www.narm.org](http://www.narm.org) regarding accountability issues and questions
- Send out information and refer to NARM website for Accountability documents
- Receive complaints regarding NARM CPMs
- Respond to complaints following NARM's process for Complaint Review and Grievance Mechanism

- Regularly update the NARM Board regarding the activities of Accountability Committee
- Seek legal advice when appropriate
- Write an annual report



## Test Department

*Ida Darragh LM, CPM*

A detailed description of Test Department tasks is kept on file in the Test Department. The general duties of the Test Department include the following:

- Correspond with state licensing agencies regarding the administration of the Written Examination
- Send Agency Packs as requested by agencies (CIB, registration instructions, and intent form)
- Review the Applications database to find new applicants, sending letters and Intent

# Job Descriptions 2010

Forms to candidates who are eligible for the Skills Assessment or Written Examination

- Set up test sites for the Written Examination
- Send/receive test site contracts for all test sites
- Send list of test sites, rosters, etc., to NARM's testing vendor prior to the exam dates
- Receive agency test fees (when appropriate) and forward to treasurer. Keep all pertinent information in the data base
- Send confirmation letter to all Written Examination candidates
- Send admission letters and test site directions to all candidates
- Receive test results from NARM's testing vendor. Enter results in database
- Send pass/fail letters to candidates and to Agencies
- Send retake intent forms to failing candidates

- Send reminder letters and new intent forms twice a year to failing candidates. Send pass/fail results to applicants
- Keep current list of QEs
- Review and update QE Handbook
- Write test department report and other articles for *CPM News*
- Coordinate communication between Board and NARM's testing vendor
- Participate in weekly NARM Board calls, follow up on specific tasks as defined by Board
- Keep current list of Test Department tasks, policies and procedures
- Answer or return phone calls to the Test Department
- Prepare Test Department report for NARM Board meetings, written reports for Fall and/or Spring Board meetings, and final, year-end report

# Job Descriptions 2010

- Maintain all appropriate information for NCCA accreditation, file annual report with the NCCA, submit re-accreditation application every five years

Skills Assessments fall under the direction of the Test Department and are managed by Miriam Khalsa who attends to the following:

- Receive skills intent forms
- Send QE and candidate confirmation letters
- Send candidate admission letter and equipment list to candidates
- Send QE pack to QE
- Score Skills Assessments
- Input into database
- Send pass/fail letters
- Notify applicants of results.



## Applications Department

*Carol Nelson LM, CPM*

Responsibilities include:

- Review all applications
- Correspond with individual applicants
- Create all administrative forms used in this department
- Create and maintain applicant database tables and forms (the complete database)
- Oversee incoming monies and reports sent to the Secretary
- Oversee outgoing Application packets
- Oversee continued supply of printed Application packets
- Maintain CPM table
- Maintain CPM statistics tables
- Issue certificates and wallet cards for new and renewed CPMs
- Oversee distribution of *CPM Newsletter*
- Develop detailed Policies and Procedures for the Applications Department

# Job Descriptions 2010

- Update and revise application packet
- Prepare Year End Report for NARM Board meeting, *CPM Newsletter*, and Annual Report



## Policy Management

*Miriam Atma Khalsa CPM*

Policy Management involves organizing, categorizing, and filing of all NARM Policies and Procedures. These include the following specific duties:

- Maintain current Policy and Procedure Manual
- Make sure all policies are updated and current
- Provide current copies to Board Members either by mail or at Board meetings
- Archive old policies when replaced, changed, or retired

- Keep a history of when these changes are made
- Keeps ongoing task list from Board calls and meetings and send the list weekly to Board members



## Special Projects

*Brynne Potter CPM*

- Provides ongoing assessments of the status of projects
- Coordinates the Out-of-Country preceptor site approval process
- Oversees the website redesign process



