North American Registry of Midwives

2002 Annual Report

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Compiled by:

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North American Registry of Midwives

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Board Members

NARM Board of Directors

Ida Darragh, LM, CPM Chairperson Testing

Ruth Walsh, MA, CPM
Outgoing Chairperson

Shannon Anton, CPM Vice-Chairperson Accountability

Carol Nelson, LM, CPM *Treasurer*

Debbie Pulley, CPMSecretary

Public Education & Advocacy

Sharon K. Evans, CDM, CPM *Applications*

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2002 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.

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 Personnel Research Center, a professional testing agency, consulting with Dr. Gerald Rosen, for psychometric oversight and guidance. NARM

maintains a web site (www.narm.org) for distributing information to candidates, certificants, and the general public.

In 2002, NARM received accreditation by the National Commission on Certifying Agencies (NCCA), the accrediting division of the National Organization for Competency Assurance (NOCA). NOCA/NCCA accreditation means that our certification process was reviewed in detail and meets or exceeds the standards set by NOCA for certifying agencies. This accreditation has been a goal of NARM's for several years, and we are very proud to have received this distinction. The NARM Written Examination was also approved for reimbursement by the Veteran's Administration's eligible dependents program.

The year 2002 saw the completion of the 2001 Job Analysis. The task survey was sent to over 600 CPMs in 2001, and the results were analyzed in 2002 resulting in some additions to the NARM test specifications. Other tasks of the Test Department in 2002 were the administration of the Written Exam

to 135 candidates (76 NARM candidates and 59 state licensure candidates) and the Skills Assessment to 28 Portfolio Evaluation Process candidates. The Test Department offered an Item Writing workshop for CPMs who will be writing test questions for the next version of the NARM exam, and a QE workshop for Qualified Evaluators who administer the Skills Assessment. The Test Department is also actively involved in the National Organization for Competency Assurance and the Council on Licensure, Enforcement, and Regulation.

Sharon Evans, from the NARM Applications Department, reports that 179 applications were sent out in 2002, and 97 applications were received and reviewed. Eighty new CPM certificates were issued, and 143 recertifications were issued. The total number of midwives who have received the CPM certification is now 804.

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 in 19 states. Since NARM's incorporation in 1994, over one million dollars has been spent on the Certified Professional Midwife process.

Shannon Anton directs NARM's Accountability Department, which handles complaints against CPMs and follows a formal Grievance Mechanism. As the number of CPMs has grown, we have seen a corresponding increase in the number of complaints filed. In 2002, seven complaints were received in Accountability, compared with two in each of the last three years. 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.

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 our web site and all of our public docu-

ments such as the Candidate Information Bulletin and the brochure, How to Become a CPM.

In 2002, NARM added two new Board members who have taken on new duties to help with NARM's work. Joanne Gottschall is coordinating our task lists and compiling our newsletter articles. Madrona Bourdeau is organizing the policies and procedures of each department. She keeps track of all current policies, and maintains a history of expired or revised policies and procedures. Many of NARM's policies are on the web site.

At the end of 2002, we saw the retirement of chairperson Ruth Walsh, who had been on the NARM Board or its predecessor, the Interim Registry Board, for over ten years. Ruth's contributions to NARM and to midwifery in general are innumerable and considerable. We are grateful for her years of service and we know that her spirit will remain with NARM in her absence as it was in her presence. In events related to NARM or the CPM, the following occurred in 2002:

Ken Johnson, PhD, and Betty Anne Daviss, CPM, presented their CPM 2000 research project at the MANA conference, including a report on their 2001 presentation at the American Public Health Association (APHA) which was instrumental in the passage of APHA resolution supporting direct-entry out-of-hospital midwifery. Their statistical research is being prepared for publication in 2003.

NARM representatives Ruth Walsh (chairperson), Robbie Davis-Floyd (public member), and Pam Weaver (former Board member) attended the International Conference about Professional Midwifery and Self-Regulation in Mexico in June, 2002. These ladies, along with other CPMs representing MANA and MEAC, participated in the lectures, panels, and roundtable discussions, and staffed a booth with information about midwifery in the United States. Johnson and Daviss presented the CPM 2000 Statistics report. Other CPMs participating in the International conference were Ina

May Gaskin, Sandy Morningstar, Deb Kaley, Elizabeth Gilmore, and Diane Holzer.

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) where Carol Nelson serves on the Governing Council, the American College of Nurse-Midwives (ACNM), the National Conference of State Legislators (NCSL), and the International Confederation of Midwives (ICM). NARM representatives attended additional conferences for The Coalition for Improving Maternity Services (CIMS), the National Association for Childbearing Centers (NACC), the National Organization for Competency Assurance (NOCA), and the Council for Licensure, Enforcement, and Regulation (CLEAR).

The Midwives Alliance of North America (MANA) created a CPM Section of membership in their organization to make it possible for CPMs to speak with a united voice within MANA.

The National Association of Certified Professional Midwives (NACPM) was organized in Massachusetts in an attempt to establish a professional organization for CPMs.



NARM Income and Expenses, 2001

Carol Nelson, CPM, Treasurer

The year 2002 was a good year for NARM from a fiscal standpoint. We ended with money in the bank and all expenses paid. The certification process has taken a lot of financial resources. NARM was incorporated in 1992 and to date we have spent over 1 million dollars on the Certified Professional Midwife process.

NARM's main sources of income are from Test Sales and Applications. Applications include requests for applications, certifications, and recertifications. Test Sales are from the states that use the NARM exam in their Licensure/Certification process. Occasionally we will get a grant for a specific project such as last year's Job Analysis. A Job Analysis every five years or so is necessary to remain state of the art in testing.

As the treasurer for NARM, I believe a balanced budget is the only fiscally responsible way to run our organization. We need to not only be balanced but we must think ahead to projects of the future and be saving money for those projects. Another Job Analysis in five years is one such project. To remain state of the art in testing this is a must. Other projects include continued work on our test such as Item Writing workshops, work with the Qualified Evaluators and the Skills Assessment for a few examples.

We are looking forward to NARM's continued growth and a balanced budget in 2003. 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.

Income

Applications	 \$120,480.00
Test Sales	 38,800.00
Total Income	 \$159,280.00

Expenses

Advertising (This includes
brochures and pens) \$ 3,353.00
Bank Charges 745.00
Conference and Meeting Fees 17,254.00
$Consultants/contractlabor \dots 25,360.00$
Copies
Dues and memberships 8,395.00
Future Project Fund 15, 000.00
Insurance 6,564.00
Legal Fees
Office Expense 2,651.00
Postage
Printing
Returns 765.00
Supplies 4, 436.00
Telephone

Testing Expenses

Testing Company . 27,150.00
Proctors 675.00
QEs 1,625.00
Total Testing Expenses 29,630.00
Travel/Hotel/Food,
Board Meetings
and some conferences 15,017.00
End of the Year Balance 580.00

Total Expenses \$159.280.00



Accountability

Shannon Anton, CPM, Accountability Chairperson

NARM Accountability Committee follows Peer Review and Grievance Mechanism policies and addresses complaints against CPMs. Legal advice is sought when appropriate. NARM Board receives regular updates regarding the activities of Accountability Committee.

Since the beginning of the CPM credential in 1995, this committee has received fifteen formal (written) complaints. These complaints involved six CPMs, with two CPMs each facing three separate complaints.

2 complaints Currently in process with local Peer Review, utilizing NARM Peer Review Guidelines.

2 complaints Must be cleared before midwives may apply for recertification (One credential is expired, one was revoked and reapplication may be made after two years.)

9 complaints Heard in local Peer Review, three used NARM Peer Review Guidelines and six used previously established guidelines specific to state regulations or midwifery organization requirements. The majority have since adopted NARM Peer Re-

1 complaint Heard by NARM Board using
Grievance Mechanism rather than
Peer Review because it was the second complaint against the same CPM
in a few months time.

view Guidelines.

4 complaints Initiated implementation of NARM's Grievance Mechanism following Peer Review. Three of these complaints were heard in local Peer Review prior to complainants contacting NARM. When NARM was contacted, the Grievance Mechanism was initiated.

The outcome of two complaints heard in Peer Review found no fault with the CPM; 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.

One CPM credential was revoked due to noncompliance with Grievance Mechanism requirements. One CPM was placed on probation while fulfilling requirements resulting from Grievance Mechanism proceedings.

Responding to constructive suggestions made by peer review groups, this committee has created additional forms for NARM's Peer Review and Grievance Mechanism. These forms are intended to aid peer review groups in reviewing complaints and seem to be working well within the processes. The majority of peer review groups handling complaints have subsequently adopted NARM Peer Review Guidelines. The State of Arizona has its own

process contained in regulations regarding the practice of midwifery.

Following is a complete history of complaints received by NARM Accountability Committee and the outcomes of the respective Peer Review or Grievance Mechanism.

Complete History of Complaints Received by NARM Accountability Committee

2002 Seven Complaints

California complaint—Midwife has not participated in NARM's Accountability requirements. Her CPM credential was expired at the time of the complaint, and she has not attempted to recertify. She must answer this complaint in Peer Review before she may apply for recertification.

Massachusetts complaint—Currently in process with local Peer Review.

Michigan complaint—Handled by an established Michigan Peer Review Group using NARM's Peer Review guidelines. Outcome: 4 recommendations for improving her practice made to midwife.

Ohio complaint—Currently in process with local Peer Review.

Oklahoma 3 complaints—Three complaints against one midwife were handled by an established Oklahoma Midwives Association Peer Review process. **Outcome**: The OMA process resulted in recommendations to NARM for revocation of the CPM's credential. Complainants contacted NARM following the local Peer Review proceedings. Grievance Mechanism used by NARM Board committee. Outcome of Grievance Mechanism: NARM Board committee heard all three complaints via teleconference. CPM was placed on probation for her 2002-2005 certification cycle and must complete 11 requirements for improving her practice and knowledge base. She must pass the NARM Written Exam to recertify at the end of her probation.

2001 Two Complaints

Arizona complaint—Handled by an established State of Arizona Peer Review process. Outcome: No fault was found with midwife. Complainant was not satisfied and filed a second complaint which initiated NARM's Grievance Mechanism. Grievance Mechanism organized by New Mexico Peer Review chairperson. Review done by teleconference. Outcome of Grievance Mechanism: No fault was found with midwife. Several recommen-

dations for improving practice were made to midwife, and midwife met these recommendations immediately.

Pennsylvania complaint—Handled by an established Pennsylvania Peer Review Group using NARM's Peer Review guidelines. Outcome: 12 recommendations for improving her practice made to midwife.

2000 Two Complaints

Indiana complaint—Handled by Indiana Peer Review group using NARM's Peer Review process. **Outcome**: 5 recommendations for improving her practice made to midwife.

Michigan complaint—Third complaint against this CPM, received shortly after her CPM was revoked for noncompliance with Grievance Mechanism. This complaint must be reviewed before midwife may reapply for CPM.

1999 Two Complaints

Michigan complaint—Second complaint against this CPM. NARM Board used Grievance Mechanism during a teleconference to review complaint. Outcome: 6 requirements were made for improving midwife's practice. Midwife did not comply with stated requirements, resulting in revocation of her CPM credential.

Michigan complaint—Handled by an established Michigan Peer Review process. **Outcome**: Suggestions and comments were made regarding midwife's care.

1997 One Complaint

Missouri complaint—Handled by established Missouri Peer Review process. **Outcome**: No fault was found with midwife's care.



Test Department

Ida Darragh, LM, CPM, Director of Testing

Major tasks of the Test Department in 2002 included

- 1. Analysis of the 2001 Job Analysis survey and publication of subsequent changes to the Test Specifications.
- 2. Application for accreditation by the National Commission of Credentialing Agencies (NCCA), a division of the National Organization for Competency Assurance (NOCA); accreditation received.
- 3. Recognition by the Veteran's Administration as an "approved Licensure or Certification Test", meaning that CPM candidates who qualify may have their test fee paid by the Veteran's Administration.
- 4. Administration of the NARM Skills Assessment to 28 candidates and the NARM Written Examination to 135 candidates.
- 5. Presentation of Item Writing Workshop and Qualified Evaluator Workshop at the MANA conference, October 24.
- 6. Attendance at the NOCA and CLEAR conferences; participation on the Program Committee for NOCA and the Credentialing and Exam Committee for CLEAR.

Report on the Job Analysis survey

The North American Registry of Midwives (NARM) has completed the Job Analysis from the survey that was done in 2001. This report begins with a comparison of the response rate and demographics of the 1995 and 2001 surveys, then describes in more detail the respondents of the 2001 survey, and finishes with a summary of the results.

The previous Job Analysis, done in 1995, was sent to over 3.000 midwives who were identified from many sources, including state mailing lists, subscription lists, and various membership lists. Some were returned as undeliverable, but 817 surveys were returned by the midwives (a response rate of 28.5%) and their responses became the basis for the NARM Test Specifications. The 2001 Job Analysis was sent only to Certified Professional Midwives (CPMs), which at the time of mailing numbered 674. Some were returned undeliverable and some were returned after the deadline, but the analysis was done on 365 responses that were received on time. This is a 58% response rate, which is considered very good for a mailing of this size. We are very grateful to all the CPMs who participated in this survey.

In 1995, 69% of those who returned the survey were direct-Entry Midwives (DEMs), 31% of the respondents were Certified Nurse-Midwives (CNMs), 73% attended births at home, 22% attended births in the hospital, and 13% attended births in birth centers (there is some overlap due to practice in more than one locale). In the 2001 survey, less than one percent were CNMs, 91% attended births at home, 1% in the hospital, and 6% in birth centers. This seems to be more a reflection of the CNM/DEM ratio than a change in the practice site of midwives. Interestingly, the results of the analysis (the tasks identified as essential to midwifery care) did not change a great deal, even considering the demographic differences in the initial survey (many backgrounds) and the recent survey (all CPMs).

The 2001 Job analysis was done to verify that the tasks currently required for certification were still a valid measurement of the actual job being performed by midwives (a requirement for our accreditation as a certification agency), and also because this would be the first survey done just of CPMs rather than the broader midwifery community.

The demographics reported here reflect only those who responded to the survey, not the entire group of CPMs. Those who did respond are the ones who will determine the knowledge, skills, and abilities required for certification as a CPM.

Slightly over half (55.4%) of the respondents lived in the seventeen states that license Direct Entry Midwives. The largest number of respondents came from California (8.5%). Six states had only one respondent. The average (mean) number of years of experience of those completing the survey was 13.92, with the largest group having 20 years experience. Total years in practice ranged from 1 to 55.

Nearly one half (46.6%) of the respondents were between the ages of 41 and 50, with over 80% being between the ages of 31 and 60. No respondents were under 21. Only two respondents were male (.5%). Ninety four percent of the respondents were Caucasian, with the remainder being Black, Hispanic, or American Indian.

Seventy four percent were apprentice trained. Twelve percent attended a Midwifery Education Accreditation Council (MEAC)-accredited school and ten percent attended a non-MEAC midwifery school. Slightly over two percent attended nursing school, and less than one percent each attended CNM school or Medical school.

The results of the analysis have confirmed that the essential job of midwifery has not changed significantly in the past six years. This is not surprising, since the process of natural birth has not changed significantly in eons. It does also confirm that CPMs rely less on technology and fads than on an understanding of the body and mind.

Most of the additions to the test specifications that will come as a result of the 2001 Job Analysis do not represent changes to the practice of midwifery, but are reflective of midwifery knowledge that was not considered in the first Job Analysis. These include a basic knowledge for education and counseling on blood borne pathogens such as HIV, Hepatitis B&C; viruses such as toxoplasmosis, rubella, cytomegalovirus, and herpes. Lab work has been given its own category.

Other additions include Vaginal Birth After Cesarean (VBAC), and management strategies for unexpected breech or twin births. Recognizing, consulting, or transporting for uterine rupture, uterine inversion, amniotic fluid embolism, stillbirth, birth defects, or Meconium Aspiration Syndrome have been added. New additions to the postpartum evaluation include educating about environmental, biological, occupational, and pharmacological factors affecting breastfeeding; and knowing the signs and symptoms of postpartum infections, depression and psychosis, late hemorrhage, and thrombophlebitis. Additions to the signs and symptoms for the newborn include: infections, polycythemia, cardio-respiratory abnormalities, glucose disorders, hyperbilirubinemia, birth defects, failure to thrive, and early and late onset newborn hemorrhagic disease.

The revised Test Specifications were published in the Candidate Information Bulletin, which is available from the NARM Test Department testing@narm.org or on the web at www.narm.org.

NOCA Accreditation

NARM is pleased to announce that we received accreditation as a certifying agency from the National Commission for Certifying Agencies (NCCA) in March of 2002. The NCCA is the accrediting body of the National Organization for Competency Assurance (NOCA).

To receive the accreditation, NARM submitted an extensive application demonstrating compliance with the strict standards set by NCCA for verifying professional competency. This evaluation included every aspect of the NARM certification program, including: administrative procedures, job analysis, test development, test security, standard setting, eligibility criteria, Board responsibilities, ongoing review of all policies and procedures, and verification of reliability and validity of the credential.

NARM has always believed that midwives should be the ones to define their job and to set the standards for demonstration of competency. From the beginning, NARM has sought input from a wide variety of midwives (indeed, from all midwives) in establishing the criteria for certification. NARM was created by and for midwives to maintain the heart of midwifery while establishing a fair way to measure the demonstration of skills and knowledge defined as essential to competent practice. A key component of this process has been the preservation of multiple routes of entry into the profession and the validation of the apprenticeship model of adult education.

It is a milestone in the validation of the CPM credential to receive this designation from NCCA, a highly respected organization whose purpose is to promote excellence in competency assurance. As midwives and midwifery advocates, we are aware of the uphill struggle to receive recognition for the honorable profession to which we dedicate our lives. It is with great pleasure that we share this honor with all the midwives who have contributed to the development of the Certified Professional Midwife credential.

About NOCA

The mission of the National Organization for Competency Assurance (NOCA) is to promote excellence in competency assurance for practitioners in all occupations and professions. Their accrediting body, the National Commission for Certifying Agencies (NCCA) was created in 1987 by NOCA as a commission whose mission is to help ensure the health, welfare, and safety of the public through the accreditation of a variety of certification programs or organizations that assess professional competence. NCCA uses a peer review process to: establish accreditation standards, evaluated compliance with these standards, recognize organizations or programs which demonstrate compliance, and serve as a resource on quality certification. NCCA accredited organizations certify individuals in a wide range of professions and occupations. Of NOCA's 300 members, only 47 have reached the status of accreditation by NCCA.

Many of the credentialing programs certified by NCCA are in health related fields, such as the American Academy of Nurse Practitioners, American

Association of Critical Care Nurses, ACNM Certification Council, American Registry of Diagnostic Medical Sonographers, and the Oncology Nursing Certification Corporation. Some are in affiliated fields such as the National Certification Commission for Acupuncture and Oriental Medicine, National Council for Therapeutic Recreation Certification, and the National Certification Board for Therapeutic Massage and Body Work. Some of the credentials are unrelated to health care, such as the Certified Financial Planners Board of Standards and the National Commission for the Certification of Crane Operators. Regardless of the type of profession, the NCCA certification indicates that the credentialing program meets or exceeds the standards set for the development and administration of a valid and reliable credential.

Veteran's Administration Approval

Veterans and their eligible dependents may now be reimbursed for the cost of taking the Written Examination of the North American Registry of Midwives. The Veterans Administration has ap-

proved the NARM Exam in a category called "Licensing and Certification Tests." The approval is retroactive to March 1, 2001. The reimbursement covers only the cost of taking the test (\$700). It does not cover other fees such as the application fee or the PEP fee.

The candidate must pay NARM during the applications process, as usual. After taking the test and receiving the test results, the candidate may request reimbursement from the VA. Submit the reimbursement form, a copy of the test results, and a note requesting reimbursement. The reimbursement form (and more information) is available on the VA web site or from NARM's Test Department. The VA web site is <www.gibill.va.gov>.

Candidates eligible to have the test fee reimbursed include those covered by:

- The Montgomery G.I. Bill, also called chapter 30;
- The Veterans Educational Assistant Program (VEAP), also called Chapter 32;

 Dependents Educational Assistance, also called DEA or Chapter 35, which offer benefits to dependents of veterans who are disabled or deceased due to service-related injuries. Children are eligible up to age 26, and spouses are eligible within ten years of the death of the veteran.

Veterans are eligible for reimbursement for up to ten years after ending military service. National Guard members may also be eligible, but only while actively enrolled in the Guard.

Test fees are covered whether or not the test is passed, and will also cover retake fees.

NARM Testing

The NARM Skills Assessment was administered to 28 PEP candidates in 2002. The assessment was taken by candidates in 15 states, Canada, and Mexico. Of the 94 CPMs who have become Qualified Evaluators, 74 are active QEs representing 34 states and Canada. Qualified Evaluators are specially trained CPMs who administer the NARM Skills Assessment. Remuneration to NARM QEs was increased from \$50 to \$75 per candidate. NARM also began to require recertification of

Qualified Evaluators. QEs must maintain certification as CPMs and must recertify as QEs every five years. Current QEs have a two year period in which to recertify as QEs by video or workshop.

The NARM Written Examination was given to 135 candidates in 2002. Ten took form E and 125 took form G. Seventy-six candidates were taking the exam to complete the CPM certification process. Fifty-nine candidates were taking the exam for state licensure. 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 seven states require the CPM or the Exam portion of the CPM for licensure: Florida, Minnesota, New Hampshire, New Jersey, Oregon, Tennessee, and Vermont. NARM currently offers the Written Examination at the eleven state agencies and at nine University Testing Centers in Florida, Iowa, Massachusetts, Maryland, Ohio, Oregon, Tennessee, Utah, and Vermont.

NARM Workshops: Item Writing and Qualified Evaluators

The NARM Test Department presented two workshops at the MANA conference in October of 2002. The Item Writing workshop trained CPMs to write questions for the NARM Exam item bank. Nine CPMs attended the Item Writing Workshop. The Qualified Evaluator workshop trained experienced CPMs to administer the NARM Skills Assessment. Three new QEs were trained at this workshop and one QE took the workshop for recertification as a QE. NARM QEs must recertify every five years by either retaking the workshop of taking a video test. Five QEs recertified by video.

NARM Participation in NOCA and CLEAR

The NARM Test Department and Board of Directors participates in the national conferences of both the National Organization for Competency Assurance and the Council for Licensure, Enforcement, and Regulation. In 2002, Direction of Testing Ida Darragh and Board member Madrona Bourdeau attended the NOCA conference in Tucson in No-

vember and the CLEAR conference in Las Vegas in September. In addition, Ida served on the NOCA program committee, and on CLEAR's Exam Resources and Advisory Committee and Credentialing and Examination Issues committee.

Goals for 2003

Test Department goals for 2003 include:

Training and working with more Item Writers to create a larger databank of test questions, and the creation of form H of the Written Exam.

Continue working with NOCA and CLEAR, and maintaining our certification with NOCA.

Revision of the Qualified Evaluators training manual and the Item Writer's training manual. 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.



Applications

Sharon K. Evans, CDM, CPM, Director of Applications

The Applications Department has gone through major changes in the last year. It became necessary to divide it into two separate departments; the Certification and the Applications Departments.

Anna Sippey, midwifery consumer and advocate, after a three-year "apprenticeship," now maintains the NARM Applications Department. Dianne Osborne, former birth center Office Manager, serves as the second reviewer of applications and computer data input person. Tina Williams, midwifery consumer, advocate and hard worker for both NARM and the Midwives Alliance of North America (MANA), took over the task of maintaining certification and recertification. Sharon Evans, NARM Board of Directors member continues to oversee the two departments, creating new forms, database tables, letters to applicants and CPMs as well as submitting reports to the NARM Board of Directors.

Anna answers the phone messages, picks up the mail, receives and replies to all application requests, processes applications, maintains the NARM database, processes recertification applications (sending them to Tina Williams) and accounts for all monies. She processes everything into their respective handwritten journals and databases, sends monies to the NARM Treasurer, reviews every application, approves and passes on to the second reviewer all applications meeting NARM requirements. Once applicants are approved for either testing or certification, she notifies the respective department. At frequent intervals, database tables and pertinent information are forwarded to specific NARM Board members. She also oversees the distribution of the CPM Newsletter. Needless to say, Anna is an integral part of the whole NARM certification process.

As the second "reviewer," Dianne looks over each application Anna has processed. Once the application is reviewed, Dianne inputs data into the computer, comparing her table along with the ap-

plication. Next, she inputs the Preceptor Table. She collects and files all applications and subsequent documentation into the appropriate file cabinets. At the time of certification, Dianne collects pertinent demographic data, hand-writes the information into our CPM Statistics forms, and then inputs the information into the computer. Finally, she compresses and files the applications into their final resting place, the CPM filing system.

Anna notifies Tina when applicants qualify for their CPM certificate. Tina updates the CPM Table and issues certifications and recertifications. She also issues CPM renewal reminders on a quarterly basis and compiles the NARM Annual Report.

Applicants

This year the Applications Department received a total of **97** applications. Comparisons have been made for the following years:

Year	Application Packets Sent Out	Applications Received During the Year	Applicants in Process at Year End
2002	179	97	94
2001	154	90	90
2000	220	59	111

CPMs

80 new CPM certificates were issued in 2002 for a total of **804** CPMs. **144** CPMs were expired as of December 30, 2002.

Year	Total CPMs	Certificates Issued	Recertifications Issued	Expired CPMs
2002	804	80	143	144
2001	724	100	148	52
2000	624	100	72	18

Finances

Fees were received by the Applications Department as follows:

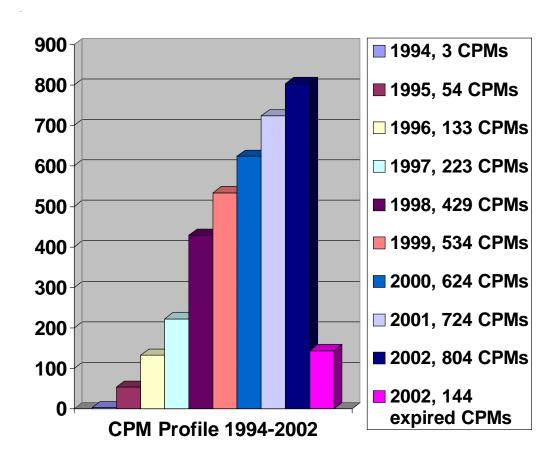
Year	Application Fees	Recertification Fees	
	Received	Received	
2002	\$100,089.00	\$22,010.00	
2001	\$110,967.00	\$22,630.00	
2000	\$118,338.28	\$10,645.00	

Preceptors

NARM now lists 127 preceptors in the NARM Preceptor Table. In November of 2002 preceptors were sent a survey letter requesting information such as address confirmation, numbers of births attended, etc. The database lacked addresses for many preceptors, thus, only a limited number of

preceptors were reached. Regardless, the response has been favorable. The information received will further verify, besides updating pertinent demographic information, the soundness of the midwifery model of apprenticeship education.





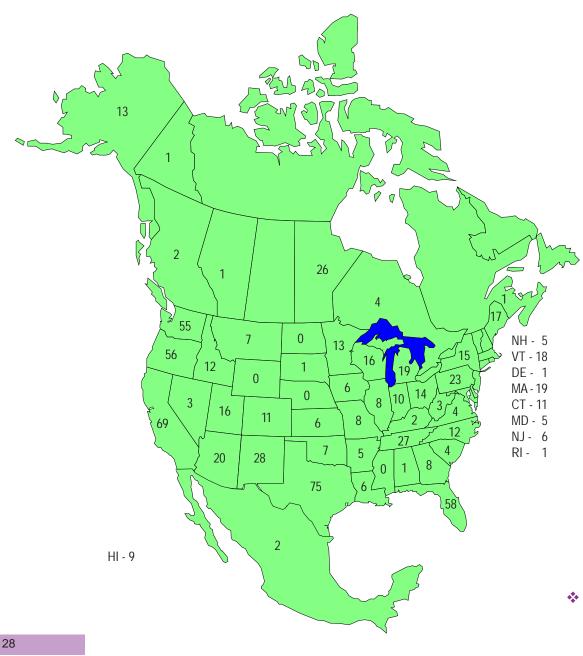
Public Education & Advocacy

Debbie Pulley, CPM, Director of Public Education & Advocacy

This department's main responsibilities are to answer calls, answer e-mails, and send out information. Since January 1, 2002, we have received over 1700 calls on the toll free line. Of these calls there were requests for 480 "How to Become a CPM" brochures, 10 Agency/PR Packets, 15 Candidate Information Bulletins. 1370 NARM Brochures were also mailed out. There were 350 calls asking for midwife referrals. The remainder of the calls were

general questions about the NARM process. This department also routes calls and e-mails to the appropriate departments, manages the Board e-mail list, keeps minutes for Board calls and meetings, collects articles for the CPM News, acts as PR liaison to the press, arranges lodging/meeting space for Board meetings, and formats and arranges printing for NARM documents. The number of volunteer hours for this office is 30 per week x 52 weeks per year = 1560 hours per year.

Following is a chart listing the number of CPMs across North America as of March 22, 2003.



North American Registry of Midwives

N

Α

R

M



Chairperson

Ida Darragh, LM, CPM

- Facilitates weekly board meeting call.
- Facilitates twice yearly board meetings.
- Maintains contracts with State licensing agencies.

Treasurer

Carol Nelson, LM, CPM

The by-laws of the North American Registry of Midwives (NARM) state that, "The Treasure 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 that 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

- is responsible and keeps an accurate accounting of all funds
- does all of the bookkeeping and accounting of the funds,

- including deposits and paying of all bills as they become due
- creates reports and presents 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, creates proposed budgets for up the coming year
- answers all correspondence, calls, e-mails and questions involving NARM's finances

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

NARM's Department of Public Education and Advocacy is considered the front door for the organization. The department fields approximately 200 calls and e-mails per month including inquiries regarding how to become a midwife or CPM, midwives who need assistance filling out the application, parents looking for a midwife in their area, insurance companies verifying certification of a midwife and reporters looking for information. This department is also in charge of and attending conferences representing NARM and is responsible for making sure all NARM's literature is up-to-date and available upon request. "How to Become a CPM" and CPM Brochures are sent out regularly. The new web page was designed this year and is regularly updated.

Accountability

Shannon Anton, CPM

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

- Answer calls regarding accountability issues and questions.
- Answer e-mails sent from < www.narm.org > regarding accountability issues and questions.
- Send out information and refer to NARM web site for Accountability documents.
- Receive complaints regarding NARM CPMs.
- Respond to complaints following NARM's process for Peer Review for Handling a Complaint and Grievance Mechanism.
- Regularly update NARM Board regarding the activities of Accountability Committee.
- Seek legal advice when appropriate.
- Write annual report.



Test Department

Ida Darragh, LM, CPM

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

- Correspond with state licensing agencies regarding the administration of the Written Examination.
- Send Agency Packs as requested by agencies (CIB, HTB, registration instructions and intent form).
- Review Applications database to find new applicants, sending letters and Intent 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 National Measurement and Evaluation (NME) prior to the exam dates.
- Receive agency test fees (when appropriate) and forward to treasurer. Keep all of this 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 NME. 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.
- 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.
- 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 NME.
- 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.

Ongoing Special Projects for next year and beyond:

New Written Examinations

Coordinate development of new forms of the Written Examination. Maintain Item Writers Handbook. Solicit item writers, distribute item writers materials, receive non-disclosure forms, send all new items through sets of review teams including final review by board, coordinate with NME on item database and printing of exams, keep statistics on performance of exam items.

Applications Department

Sharon Evans, CDM, CPM

- Oversee the activities of the two NARM Application Reviewers, Anna Sippey and Dianne Osborne.
- Oversee the activities of the NARM Certification Department (i.e., Tina Williams).

- Create form letters as required.
- Upgrade and create additional database tables as required.
- Provide department reports (annual and twice yearly) for Applications, Certification and Recertification and the CPM newsletter.
- Assist the second reviewer as needed with data-entry.

Outline of Applications work duties of Anna Sippey

- A. Receive all mail.
- B. Date stamp mail
- C. If check is included stamp with NARM deposit stamp
- D. Enter into finance ledger, (if application request, application or recertification, i.e. Any purchase)
- E. Mail out application packets when requested, sending application by Priority mail with Delivery Confirmation
- F. Mail out recertification acknowledgment letter when receiving a recertification application
- G Copy recertification application at the end of the month and send to Tina Williams. Notify Tina Williams

- when a recertification is needed right away by e-mail
- H. Assign application number for new applicants and send acknowledgment letter to applicant
- I. Audits keep track of all applicants that need to be audited as well as auditing CPM's once a month
- J. Enter all monies into Finance Table
- K. Enter all out-going mail into Correspondence Table
- L. Analyze applications, enter all information into database
- M. Notify the Testing Department when applicant is ready for testing (Skills Assessment and or Written Examination)
- N. Finance Ledger copy ledger pages (keep copies for reference), calculate amount made for the month and forward all to Carol Nelson
- O. Expenses Copy (keep copies for reference) receipts, fill out expense form, calculate and send to Carol Nelson
- P. Prepare and mail out NARM Newsletter, twice yearly

- Q. Maintain NARM database writes into the following tables
- Applications Tables
- Finance Table
- Correspondence Table
- R. Collect voice mail daily
- S. Call back on messages that are application related forwarding all recertification questions to Debbie Pulley.

Outline of Second Reviewer work duties of Dianne Osborne

- I. Review applications
 - A. Hand-write review information in notebook labeled Application Reviews
 - B. When notebook is full, label date (from) and date (to) on front of notebook
 - C. Archive notebook in Correspondence Archive file
- II. Extract Preceptor information from each application
 - A. Hand-write preceptor ID # in each application
 - B. Update Preceptor table
- III. Update Application Reviews table

- A. Cross reference with Applicant table
- B. Cross reference with updated CPM table
- IV. Each month sort those ready for certification in Application Reviews table
 - A. Create a query of those ready for certification
 - B. Pull applications that are ready for (or recently received) certification
 - C. Make a copy of the Application Reviews table, re-naming it "Archive (listing the month for identification purposes) each month
 - D. Delete names of those ready for certification from the Application Reviews table
- V. For each application, extract statistical information for statistics tables by hand-writing information for each new CPM on the CPM Statistics Form
 - A. Update the three CPM Statistics tables
 - B. 3-hole punch and place CPM Statistics Forms in a binder labeled CPM Statistics (and the years to and from)
 - C. Archive binder when full
- IV. Prepare application for archive

- A. Label front of file with name, CPM number, issuance and expiration dates
- B. Add copy of CPM certificate to file
- C. Remove and shred second copy of application
- D. Shrink wrap application
- E. Archive file.
- VII. Help with CPM newsletter

Outline of Certification and additional work duties of Tina Williams

- I. Certifications
 - A. Receive notice from Applications
 Department of applicants who are ready
 for certification either via e-mail or
 updated Applicant Table.
 - B. Add entry date, issue date (current date), name and contact information, Social Security number of new CPMs to CPM Table.
 - C. Update ADC codes monthly in CPM Table.
 - D. Assign an expiration date based on the issue date plus three years.
 - E. Assign a CPM number based on the year and month they are certified and

then the number of certifications previous to them that month in the format. I.E., 02010001 is the CPM number of the first certificate granted in January of 2002.

- F. Use mail-merge features to print CPM certificate, wallet card, and letter announcing that they are now a CPM to the new CPMs.
- G. Apply signature stamps to letter and certificate, attach gold seal and emboss seal on certificate.
- H. Mail the above materials along with a CPM brochure to each new CPM.
- I. Mail a copy of each new certificate to Anna to complete the file/archive.

II. Recertifications

- A. Receive copies of recertification forms from Applications Department.
- B. Carefully read each form to make sure the CPM meets all requirements for recertification.
- C. For those who do qualify for recertification:
 - Double-check that the contact information in the CPM Table is the same as on their recertification application, and make updates as necessary.

- 2. Update entry date and expiration date (add three years to previous expiration date regardless of time of renewal).
- Enter information about their practice for general statistics about CPMs from their recertification form.
- 4. Use mail-merge features to print CPM certificate, wallet card, and letter announcing that they have received their recertification.
- 5. Apply signature stamps to letter and certificate, attach gold seal and emboss seal on certificate
- 6. Mail the above materials along with a CPM brochure to each new CPM.
- D. For those who do not qualify for recertification:
 - 1. Determine the area needing fulfillment and confer with Applications department about the best way to get the needed information.
 - 2. Then, after the application is complete, continue with steps above for recertification.

III. Renewal Notices

- A. Every three months send a (slightly different for each group) renewal reminder letter:
 - 1. Those CPMs whose certification has expired.
 - 2. Those CPMs who will expire within three months
 - 3. Those CPMs whose certification will expire from three to six months from the current date. This group will receive a recertification form.
- IV. Other computer work
 - A. Do other database or text layout work as assigned by the NARM Board.
 - B. Compile NARM Annual Report.

Tables that are to be written into (all others are readonly):

- Application Reviews table
- Statistics tables (3 tables)
- Preceptor table

Reviews

Joanne Gottschall, ASN, RN, CPM

Provides ongoing assessments of the status of projects.

- Is responsible for the quarterly production of the *CPM news*.
- Keeps ongoing task list from board calls and meetings and sends the list weekly to board members.
- Keeps ongoing list of ideas for the CPM News and follows up with those who have agreed to write the articles.

Policy & Procedure

Madrona Bourdeau, CPM

- Maintain current Policy and Procedure Manual
- Make sure all policies are updated and current.
- Provide copies to Board Members either by mail or distributed at Board meetings.
- Archive old policies when no longer needed or replaced/changed.
- Keep a history of when these changes are made
- Insure Board members have current manuals and updates.

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