North American Registry of Midwives

2009 Annual Report

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This annual report can also be found on the web at www.narm.org.

North American Registry of Midwives

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Board Members

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

Robbie Davis-Floyd Ph.D.

Public Member (outgoing) Anthropologist/Writer/Editor

Brynne Potter CPM

Newsletter

Miriam Atma Khalsa CPM

Policies and Procedures

Elan McAllister

Public Member (incoming)



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

2008 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 directentry midwives, and in all the states that license midwives specifically for out-of-hospital birth. NARM's midwifery certification is a state-ofthe-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-do-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) for distributing information to candidates, certificants, and the general public. In 2009, the NARM Test Department, under the direction of Ida Darragh, oversaw the administration of the NARM Skills Assessment to 52 Portfolio Evaluation Process candidates (up from 43 in 2008) and the Written Examination to 209 certification or licensure candidates (up from 200 in 2008).

NARM presented workshops related to preceptor-apprentice relationships, charting, ethics, statistics, and legislation in Colorado, Alaska, Wisconsin, Illinois, and Ohio. The NARM Test Department also participated on committees for the Institute for Credentialing Excellence, and

the Council on Licensure, Enforcement, and Regulation (CLEAR).

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 2009 was 217. 155 new CPM certificates were issued, and 275 recertifications were issued. The total number of midwives who have received the CPM certification by the end of 2009 is 1645.

A major accomplishment for NARM in 2009 was the analysis of the 2008 NARM Job Analysis Survey, which determines the knowledge, skills, and abilities necessary for the practice of certified professional midwifery. Of the 1099 CPMs eligible and able to be contacted, 477 responded for a response rate of 43%. The test

blueprint has been updated to reflect the required knowledge and skills.

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 2009 was \$239,145.00. Normal operating expenses ran \$208,063.00. The remainder was used to purchase a larger Applications office and to begin the re-design of the web site.

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. In 2009, NARM processed eight complaints. Two complaints were dismissed. One was processed through Complaint Review, resulting in recommendations, and one through

the Grievance Mechanism, resulting in revocation. Two complaints are in process, and two are on hold pending state regulatory reviews. 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.

Robbie Davis-Floyd is the public member of the NARM Board. Robbie, a well-known author and researcher, helps to write and edit many of NARM's documents and policies. She travels widely to promote understanding about midwifery around the world. Robbie's term as public member ended in 2009, and the position

was taken over in October by Elan Vital McAllister.

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. Eight OOC clinical sites were approved in 2009. Another ongoing project for Brynne is overseeing the website re-design project.

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 2009, NARM joined with five other organizations to support the inclusion of CPMs as approved Medicaid providers in federal

healthcare legislation. The other organizations 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 will continue through 2010.

In 2009, 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 Citizen's Advocacy Center, the American Association of Birth Centers, the International Cesarean Awareness Network, the National Organization for Competency Assurance (NOCA), 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.



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NARM Income and Expenses

Carol Nelson LM, CPM, Treasurer

The year 2009 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 2009 was \$239,145.00.

NARM's main sources of income are from Test Sales and Applications. Applications include requests for applications, certifications, and recertification's. Our income from the Applications Department in 2009 was \$195,706.00 Test Sales are from the states that use the NARM exam in their Licensures/Certification process. Income from the Test Department in 2009 was \$34,966.00. Occasionally we will get a grant for a specific project such as the 1995, 2001 Job Analysis. A Job Analysis every five years is necessary to remain state of the art in testing. We also have miscellaneous income from such

things as brochure sales, frame sales and interest. This total in 2009 came to \$8,473.00.

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 Job Analysis was one such project. 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 Assessments, education, advocacy and participation in national and international midwifery initiatives.

Our expenses are set to allow for an annual increase in net assets, so that 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 CPM's and the Midwives Model of Care, education and advocacy initiatives), Dues/Membership in organizations such as the National Organization for Certifying Agencies (NOCA), Insurance, Legal Fees to be sure we stay Legally Defensible, Office Expenses and Supplies. This year one of our largest expenses was purchasing a new applications office. We had anticipated this and have been saving for years to make this purchase.

We are looking forward to NARM's continued growth in 2010.

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.

Income and Expense Statement for 1/1/2009 to 12/31/2009

Income

Applications	\$195,706.00
Test Sales	34,966.00
Other Income (Brochures, frame	
sales interest income)	8,473.00

Total Income \$239,145.00

Expenses

Advertising 2,160.00
Bank Charges 1,241.00
Conferences and
Meeting Fees 26,851.00
Consultants/Contract Labor 45,843.00
Donations: FAM & MAMA
campaign 2,260.00
Dues and Memberships 4,620.00
Insurance 4,351.00
Legal Fees 8,130.00
Office Expense
Postage/shipping 11,174.00
Printing 3,824.00
Supplies 8,609.00
Telephone 8,457.00

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Testing Expenses
Testing Company 28,440.00
Cutscore
Proctors 2,600.00
QEs3,900.00
Total Testing Expenses \$36,908.00
Travel/Hotel/Food,
Other travel and Board
Meeting expenses 5,794.00
Utilities 849.00
Website development 7,265.00
Total Expenses\$208,063.00
Retained Earnings \$31,082.00
Investment in New
Applications Office \$50,000.00
Total Expenditures for the
year\$258,063.00



Accountability

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. 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.

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 2009:

Two complaints were made by third parties; one was deemed by NARM as not appropriate for NARM Complaint Review, and one did not have the support of the midwifery client and therefore could not proceed to Complaint Review.

One complaint was heard in Complaint Review and resulted in recommendations to the midwife. One complaint resulted in the revocation of the midwife's CPM credential after being addressed in the Grievance Mechanism.

At the close of 2009 there was an open complaint against a CPM applicant and another against a CPM, each will be addressed in 2010. Two other complaints received in 2009 are on hold, pending completion of state regulatory reviews.

Test Department

Ida Darragh LM, CPM, Director of Testing

Major Tasks of the Test Department in 2009 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 Michigan, Maryland, and Missouri.
- 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 Wyoming.
- 4. Training and recertifying NARM's Qualified Evaluators, who administer the NARM Skills Assessment to the PEP candidates. The QE workshops were held at the MANA Conference and in Missouri. Our total number of active QEs is now 86.
- 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.

NARM Testing

The NARM Skills Assessment was administered to 52 PEP candidates in 2009 (up from 43 in 2008.) 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 209 candidates from (up from 200 in 2008) in 34 states, 2 Canadian provinces, and two from Mexico. Seventy eight percent were taking the exam to complete the CPM certification process and 22% were taking 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 fourteen 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, and Wisconsin. 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 2009, the pass rate for the Written Examination was 75%.

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 H and J of the NARM Exam were administered in 2009, and form K was introduced for the August exam date. The Spanish translation of Form H was administered twice.

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 2009, Director of Testing, Ida Darragh, attended the NOCA conference in Phoenix in November and the CLEAR business meeting in San Diego in January, and CLEAR general convention in Denver 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. Ida continues to serve on the National Commission for Certifying Agencies (NCCA), the accrediting arm of NOCA.

The 2008 NARM Job Analysis Survey was administered as a web based survey from October-December, 2008. The responses to the survey were analyzed in 2009 for an update to the test specifications and the knowledge, skills, and abilities required for certification. Form K of the written exam reflects the results of the Job Analysis.

Test Department goals for 2010 include:

- Training and working with more Item Writers to create a larger databank of test questions.
- Continue working with NOCA and CLEAR, maintaining our certification with NOCA, 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

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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 conducted in 2001 and the test specifications were revised at that time. In 2008, the NARM Board of Directors undertook 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.

To create the 2008 survey, a request was sent by e-mail to 150 certificants, representing various geographic regions and years of experience, asking for participation in a focus group to expand the 2001 survey. Forty certificants responded to the request and were sent the 2001 list for comment. Twenty certificants, representing 15 states and one Canadian province, returned the survey with suggestions for additions. The NARM Board reviewed the suggestions from the focus group and the items from the 2001 survey that

did not score high enough for inclusion in the test specifications, and created a new list of tasks. This list became the 2008 survey instrument.

The NARM Board decided to conduct the Job Analysis with a web-based survey rather than with a paper-based, mailed survey. NARM purchased software developed by Snap Survey for this purpose. Creating the survey within this software system and running the beta testing took one year. Respondents were asked to rate each of the approximately 800 tasks on a seven-point scale indicating how important that specific knowledge or skill is to their practice as a midwife.

Data collection began in September 2008 and continued until December 2008. Invitations to participate were sent to all 1134 individuals with the CPM designation whose certification was active as of August 2008. Those considered eligible to respond to the survey were notified by newsletter, letter, postcard, and/or e-mail during September of 2008. Of the 1134 who were sought for the survey, 35 were unable to be

reached resulting in a sample of 1099 potential respondents actually contacted for the survey. All respondents were asked to complete the survey on the web. All were given a password and a code based on their last name and certification number. The total number of respondents who opened the survey was 477, but 16 did not actually enter any data, making the actual number of respondents 461, or 41.9% of the sample. Because the survey was long, the respondent number dropped off during the survey. A total of 400 respondents (36.4% of the sample and 83.9% of the respondents) completed the survey. Given the length of the survey this is an impressive number. The data obtained from the 55 incomplete surveys were retained and used in the subsequent analysis.

Demographic Data:

98.5% of the respondents indicated a female gender (1.5% gave no response to this question). 94.1% indicated a Caucasian ethnic background. There were 44 states represented among the respondents, with the largest number being from

Texas (13%) and California (12%). 45% were trained through apprenticeship, 33% through a MEAC program, 12% through a non-accredited program, and 7% were self-taught. 2.4% were nurse-midwives. 9% were high school graduates, 36% had some college, 37% were college graduates, 8% were nurses, 7% had master's degrees, and 1.5% had PhDs.

Results:

Results were tabulated, and a committee of subject matter experts reviewed the results. All items scoring above 5 were included on the final list, below 4 were not included, and items scoring between 4-5 were reviewed by the experts for a final decision. The final list of tasks became the new Test Specifications. Most newly suggested items did not make the cut, so there were very few additions to the list. Very few old items were removed from the list. The outcome of the 2008-2009 Job Analysis survey indicated to the board that the essential knowledge and skills for certified professional midwives has not changed significantly in recent years. In a comparison of

the items on the current written exam, no items were found on the current exam that were not included in the new specifications. The few new content areas will be reflected in item writing during 2010. The percentage of items in each content domain does not need to be changed based on the job analysis results.

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, under Technical Documents.

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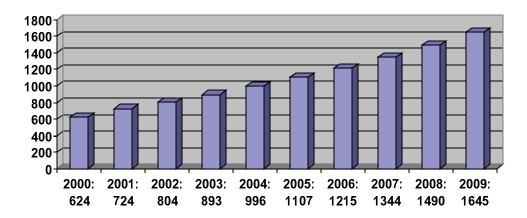
Applications

Carol Nelson LM, CPM, Director of Applications

Certifications

- In the year 2009, the NARM Applications Department received a total of 217 applications.
- Sixty-eight applications were sent out to people requesting application packets.
- One hundred and twelve applicants took advantage of downloading our online application.
- One hundred and fifty-five new CPM certifications were issued in 2009.
- There were a total of 1645 CPMs at the end of 2009.

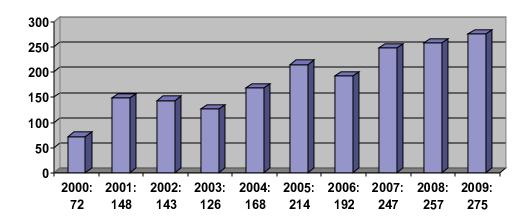
Total number of CPMs by year



Recertification

Two hundred and seventy-five recertifications were sent in 2009. The Applications Department has a Recertification Table to keep track of incoming and outgoing recertifications. A notice 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.

Recertifications by year



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Inactive Status

In 2009 there were 83 people who took advantage of the Inactive Status option.

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

Audits

The Applications Department generates random audits from applicants and CPM's 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 64 people who were recertifying in 2009. These were from twenty six different states and one from Canada.

There were 43 applicants audited randomly and 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, and an Emergency Care Plan and the three charts for their continuity of care births.

NARM has two new policies that have gone into effect as of January 2010:

All applicants will be required to submit charts for their continuity of care births.

Random audits will not hold up applications. Incomplete applications or applications being audited due to discrepancies will not be passed on to take the Skills Assessment.

Finances

The Applications Department receives fees for application packets, CPM applications, recertification's, name changes, extra certificates or wallet cards, and selling brochures. In 2009 a total of \$196,857.00 was processed through the Applications Department.

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Special Projects

Brynne Potter, CPM, LM Special Projects

Brynne Potter is responsible for coordinating multiple tasks under the heading of Special Projects. This year those tasks included overseeing the creation and maintenance of the approval process for Out of Country Clinical Sites for PEP applicants. NARM approved eight OOC sites in 2009. Also included is the management of NARM's website redesign project, expected to complete in 2010. Brynne also serves as facilitator and meeting planner for the Allied Midwifery Organizations twice yearly meetings. She represented NARM on the Steering Committee of the MAMA Campaign and helped to develop the communication systems and social networking for the Campaign. She also maintains a weekly summary of the status of ongoing projects for the board and brings together the articles that are needed for the newsletter.

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Public Education & Advocacy

Debbie Pulley 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. There are also 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. The CPM News is published twice a year and is available on the web.

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 Citizen's Advocacy Center (CAC), the National Organization for Competency Assurance (NOCA), and the Council for Licensure, Enforcement, and Regulation (CLEAR).



Policies & Procedures

Miriam Atma Khalsa, CPM Director of Policies and Procedures

NARM adopted or expanded policies or procedures in 2009 in these areas:

- OOC (out of country) policy: further developed and expanded
- Application deadline: for February exam moved to September 10th
- Clarified MEAC early testing policy
- Currency for MEAC students: required within the three years prior to submission of application
- Preceptor Initials and Signatures
- Recertification after expiration: -for midwives who have maintained a state license -definition of "attend" for required documented births
- Clarified the definition of a transport (for the two allowed in application)
- Public notification of a revoked CPM

- Preceptor qualifications expanded requirements
- Neonatal Resuscitation required for certification as of Jan. 1, 2011
- Revised NARM Mission statement
- Conflict of Interest Policy to be added to By-laws and signed by the NARM Board of Directors
- Approved Carol Nelson as trustee on behalf of NARM to purchase the house and equity in the site for the new applications department
- NARM policy re MANA conference ad and mailings
- Robbie Davis-Floyd designated as Senior Advisor



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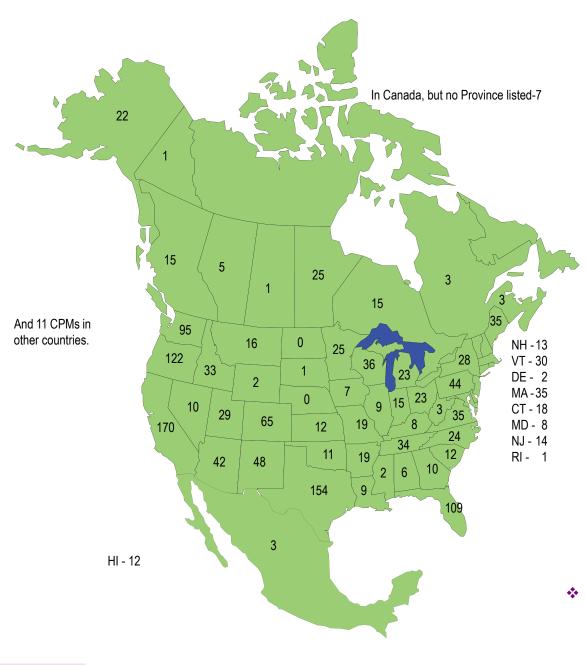
Newsletter and Special Projects

Brynne Potter, LM, CPM

- Provides ongoing assessments of the status of projects.
- Is responsible for the semi-annual 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.



Following is a map listing the location of CPMs in North America as of December 31, 2009.



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North American Registry of Midwives

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Biographies of NARM Board Members

Shannon Anton LM, CPM

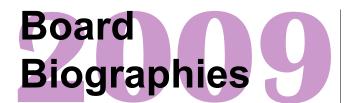
Shannon is an apprentice trained midwife and founding member of the Bay Area Homebirth Collective in San Francisco. She co-founded National Midwifery Institute in 1995 and continues as co-director, program administrator, and instructor. Shannon has served on the board of the California Association of 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 National Organization for Competency Assurance, and



is currently 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.

Robbie Davis-Floyd PhD

Robbie is Senior Research Fellow in Anthropology at the University of Texas Austin. A cultural anthropologist specializing in medical, ritual, and gender studies and the anthropology of reproduction, she lectures at childbirth, midwifery, and obstetrical conferences around the world. She is author of over 80 articles and of *Birth as an American Rite of Passage* (1992); coauthor of *From Doctor to Healer: The Transformative Journey* (1998); and coeditor of nine collections, including *Childbirth and Authoritative Knowledge: Cross-Cultural Perspectives* (1997); *Cyborg Babies: From Techno-Sex to Techno-Tots* (1998); *Daughters of Time: The Shifting Identities of Contemporary Midwives* (a special triple

issue of *Medical Anthropology* 20:2-3/4, 2001), and *Mainstreaming Midwives: the Politics of Change* (2006). Her research on global trends and transformations in health care, childbirth, obstetrics, and midwifery is ongoing. She has recently coedited *Birth Models That Work*. She has been a member of the NARM Board since 1994 and retired to Senior Advisor status at the end of 2009

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 notfor-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. Both of her children were born at home with the help of midwives. Miriam is a founding member of the Massachusetts Midwives Alliance (MMA) and served on its board in various positions for eighteen years. Currently she represents MMA to the Massachusetts Coalition of Midwives, a representative group of CNMs, CPMs, and consumers who have drafted legislation and are lobbying to pass a Bill to license all midwives in Massachusetts. Miriam also represents MMA on the Partners in Perinatal Health board and is the current chairwoman. She 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 and is the Director of Policy and Procedures and manages the Skills Assessments.

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 7, 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, Tennessee. 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, and has been involved in the 1995, 2001, and 2008 Job Analysis. She has been on the NARM

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Board serving as the Treasurer since 1997 and Director of Applications since 2003.

Carol 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 in 2001, by APHA.

She is co-author of the APHA position paper, "Safe Motherhood in the United States: Reducing Maternal Mortality and Morbidity." This was adopted in 2003, by APHA. Carol 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. In 2009 she was selected as one of the "Program Planners at large" for the APHA Annual Meeting. 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

for "normal birth." She is currently serving on the APHA Governing Council as a representative for the Maternal Child Section. 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 13 and 17, who were born at home in Virginia with the aid of midwives. She became a CPM in 2005 and is a partner in Mountainview Midwives, a homebirth 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 liaison to the state Board of Medicine, which oversees the licensure of CPMs and coordinating the education efforts of state agencies regarding the practice of licensed midwifery. She is the Chair of the Board of Trustees for the Mountaintop Montessori of Charlottesville.

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 & 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.





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

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Treasurer

Carol Nelson LM. CPM

NARM by-laws state that, "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 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 for and keeps an accurate accounting of all funds
- does all of the bookkeeping and accounting of the funds, makes deposits and pays all bills
- 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 the upcoming year
- answers all correspondence, e-mails, and phone calls involving NARM's finances, including audits.

The Treasurer and the Finance Committee make recommendations to the Board. The Board makes final decisions about the use of discretionary 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

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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.
- present NARM workshops
- attend various conventions as an exhibiter 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

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- Answer e-mails sent from <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 annual report

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Test Department

Ida Darragh LM, CPM

A detailed description of Test Department tasks is kept on file in the Test Department. The gen-

eral 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 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

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Job Descriptions

- 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
- 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: 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.

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Applications Department

Carol Nelson LM, CPM

- 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

- Update and revise application packet
- PrepareYear 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

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Special Projects

Brynne Potter CPM

- Provides ongoing assessments of the status of projects
- Coordinates the Out-of-Country preceptor site approval process
- Edits the *CPM News*
- Keeps ongoing task list from Board calls and meetings and send the list weekly to Board members
- Keeps ongoing list of ideas for the CPM
 News and follow up with those who have agreed to write the articles
- Represents NARM on the MAMA Campaign Steering Committee
- Oversees the website redesign process

