

MCCPM BY-LAWS

Article I Title

The name of this organization is the Minnesota Council of Certified Professional Midwives (MCCPM).

Article II Purpose

The purpose of the Minnesota Council of Certified Professional Midwives is to promote, protect and preserve midwifery as practiced by midwives in the state of Minnesota. We strive to maintain a safe standard of care in partnership with the families we serve and the wider birth community. MCCPM is committed to prioritizing harm reduction, reducing racial disparities, and embracing inclusion for all birthing families.

Article III Objectives

- ❖ To set a standard of excellence in care provided by midwives.
- ❖ To practice harm reduction which includes: shared decision-making/informed consent, culturally competent care, trauma-informed care, and referrals to culturally appropriate care.
- ❖ To offer annual peer review and special circumstances reviews as needed.
- ❖ To maintain skills through continuing education.
- ❖ To promote research from community and homebirth with statistics collection.
- ❖ To respond to the legal needs of midwives.
- ❖ To educate the public about the option of midwifery care and its safety.
- ❖ To support birthing people and their families' choice for birth.
- ❖ To encourage communication between midwives and other health care professionals.
- ❖ To build a community with midwives and students both locally and across the country who share common goals, fostered through the work including, but not limited to, MANA, NARM, MEAC, CfM, NACPM, MMG, The Black Home Birth Initiative, Healing Justice Network, The Oshun Center, and The Queer Birth Project.
- ❖ To actively support and prioritize student midwives and midwives from marginalized communities in Minnesota.

Article IV Membership

Members of this organization shall consist of midwives, students, apprentices, consumers, and others supporting the Midwifery Model of Care as practiced by CPMs.

Membership Categories (Active and Associate), Responsibilities and Privileges:

- I. **Category: Active Members; Voting:** Current CPMs, non-practicing CPMs, students, and other types of midwives. .
 - A. Responsibilities of Active Members; Voting

1. To pay annual dues as determined by the board by May 1. If dues have not been paid by the following meeting, membership will be suspended until paid in full.
 - a) Membership fees are additionally waived for members who belong to communities who experience systemic oppression, including BIPOC, LGBTQIA2S+, people with disabilities, etc.
 - b) No member shall be denied active status due to inability to pay.
2. To attend meetings as often as possible—Members are encouraged to attend a minimum of one of four statewide meetings or the visioning meeting per year or be actively engaged in an MCCPM committee.
3. To speak for the group only as designated.
4. To practice with integrity and accountability.
5. To participate in an annual peer review, and to submit a self-request form for Special Circumstances Peer Review to the Quality Management Program Special Circumstances Peer Review (SCPR) Facilitator within 14 days of any qualifying Sentinel Event (see Article VIII).
 - a) All MCCPM members whose experience would otherwise qualify them to become a NARM Preceptor (3 years or 50 births) are encouraged to serve on the QMP SCPR Panel when called upon by the SCPR Facilitator (See Article VIII).

B. Privileges of Active Members; Voting

1. All midwife members are eligible for support through legal defense efforts when a complaint, lawsuit, or other legal issue is being brought against them. This may include ongoing and confidential support, when necessary, in both peer-to-peer and in written form. If applicable, MCCPM will provide direct financial support and/or fundraising through its Legal Defense Fund.
2. Eligible to hold an office according to the officer description.
3. Midwife member bio listing on the MCCPM website.
4. Member of MCCPM email discussion group.
5. And other benefits as defined in the MCCPM Policy and Procedure document.

II. Category: Associate Members; Non-Voting: Any person who supports the mission of MCCPM and wants to participate in the organization, (CPMs, other types of midwives and students who choose to join as an Associate Member, midwives in other states, physicians, consumers, advocates, etc.). .

A. Responsibilities of Associate Members; Non-Voting:

1. To pay a lower tier of annual dues as determined by the board by May 1. If dues have not been paid by the following meeting, membership will be suspended until paid in full.
2. To attend meetings as desired – no minimum.

B. Privileges of Associate Members; Non-Voting:

1. Member of MCCPM email discussion group.

Article V Board of Directors

Section 1. Number and Qualifications.

The Board of Directors (BOD) of MCCPM shall be composed of a six-member cabinet. It consists of President, Vice-President, Secretary, Treasurer, Board Member at Large, and Membership Coordinator.

Section 2. Governing Powers.

The business and property of the MCCPM shall be managed by the BOD. The BOD will:

- ❖ Utilize the President as the spokesperson for the MCCPM. This designation can change for specific policies or activities at the discretion of the BOD.
- ❖ Define and interpret MCCPM policy.
- ❖ Coordinate when and where meetings shall be held.
- ❖ Coordinate which legislative actions and/or organizations that may or may not receive MCCPM support, approval or affiliation.
- ❖ Allocate monies.
- ❖ Oversee all MCCPM legal matters.
- ❖ Make any necessary emergency decisions.
- ❖ Establish what the annual dues will be each year.
- ❖ Set up elections for new officers.

Section 3. Selection and Term of Office.

Officers will hold their positions for a two-year term. Whenever possible we will stagger terms for the President, Secretary, Vice-president, Treasurer, and Membership coordinator. Vacancies will be filled as needed. Regular elections occur during the fall quarterly meeting. The President, Treasurer, and Board Member at Large are elected during odd years, and the Vice President, and Secretary, and Membership Coordinator are elected during even years.

Section 4. Compensation.

- I. Reimbursement for supplies or other expenses as determined by the BOD will be reimbursable through written request to the treasurer.

Section 5. Quorum.

Except as otherwise provided in these by-laws, a quorum consists of a majority vote of BOD members.

Article VI Officers

- I. **The President** must be an Active Member and a community Midwife in good standing. Duties include:

- A. Responsibility for setting the schedule for the meetings and designating the location.
 - B. Presiding at meetings or delegating others to chair a meeting.
 - C. Reviewing the By-laws annually with the BOD.
 - D. Overseeing Peer Review/Peer Review Facilitator
 - E. Being available for check-in by every other officer periodically.
 - F. Acting as the liaison and spokesperson for the MCCPM.
 - G. Keeping documentation of all peer review attendance and documentation MCCPM utilizes in an organizational capacity.
- II. **The Vice-President** must be an Active Member and a community Midwife in good standing. Duties include:
 - A. Acting in the absence of the President and performing tasks assigned by the President.
 - B. Assisting the President with tracking time and staying on task at meetings.
 - C. Follow up with members on tasks committed to at meetings.
 - D. Overseeing Special Circumstances Review/ SCRP Facilitator.
- III. **The Secretary** must be an Active Member in good standing. The duties include:
 - A. Keeping records of the organization.
 - B. Announcing upcoming meetings, location, and meeting time, a minimum of two weeks prior to the meeting, when possible.
 - C. Gathering and organizing meeting agenda items to distribute via email prior to the meeting.
 - D. Keeping records of all meeting minutes and sending them out in a timely fashion, within 5 business days of the meeting.
 - E. Collecting proxy votes and counting votes at meetings.
 - F. Annual Renewal with the Secretary of State.
- IV. **The Treasurer** must be an Active Member in good standing. Duties include:
 - A. Responsibility for preparation of budget proposals and tracking revenue and expenditures.
 - B. Provides financial reports to members annually or when requested.
 - C. Collecting and assisting to track dues and hearing screen fees in coordination with the Membership and Hearing Screening Coordinators.
 - D. File Annual Tax form by May 15.
- V. **The Board Member at Large** must be an Active Member in good standing. Duties include:
 - A. Acting as MCCPM Hearing Screening Program Coordinator.
 - B. Checking MCCPM PO Box if geographically convenient (or delegating to another MCCPM board member).
 - C. Keeping records of meeting minutes when the secretary is unavailable, and sending them out in a timely fashion, within 5 days of the meeting, if possible.
 - D. Additional duties as requested by the Board or the President.

VI. **The Membership Coordinator** must be an Active Member in good standing. Duties include:

- A. Coordinating and tracking dues collection, in coordination with the Treasurer
- B. Tracking meeting attendance, tracking other membership requirements, and notifying members for renewal.
- C. Assist Secretary with counting and tracking votes. Ensure that members are aware of their voting status during votes.
- D. Community outreach and MCCPM membership promotion

VII. Any officer of MCCPM, in addition to the duties conferred through these by-laws, may be given additional powers or duties as prescribed by the BOD. It is the responsibility of the full board to assist in keeping meetings respectful.

Article VII Committees

Committees may be formed, as needed, by any MCCPM member.

Article VIII Quality Management Program

- I. **Introduction:** Engaging in activities which strive to encourage continuous quality improvement is a public demonstration of the midwifery profession's commitment to reflective self and peer evaluation with the goal of providing safe, responsible, family-centered maternity care. The Quality Management Program (QMP), established by MCCPM in 2016, whereby midwives can, in confidence, freely discuss and be supportively evaluated by a group of their peer midwives, safe from subpoena or legal inquiry, to improve their practice and future outcomes. Participation in the peer review process is a requirement of membership, as well as a responsibility to the profession of midwifery and to the clients we serve.
- II. **Membership Requirement:** As an MCCPM member, each midwife agrees to:
 - A. Maintain strict confidentiality whenever participating in Peer Review or on a Special Circumstances Review Panel
 - B. Turn in a self-report, within 14 days, if any of the Sentinel Events occur.
- III. **Two branches of the Quality Management Program provide mechanisms for quality improvement:**
 - A. Annual Peer Review, which each member completes utilizing the designated form, typically done during the allotted time at one of the quarterly MCCPM meetings.
 - B. Special Circumstances Peer Review, which is organized by the SCRP Facilitator, and is conducted by a specially convened panel whenever a Sentinel Event is reported.
- IV. **Annual Peer Review Process:**
 - A. Annual peer review may be attended by CPM members, voting student members and others by invitation of the midwife being reviewed.

- B. An Annual Peer Review form is available to all MCCPM members to bring completed to their peer review. Each midwife retains this form in their own records.
- V. **Special Circumstances Review Process (SCRCP):** The SCRCP is designed to be a supportive process through which midwives receive constructive feedback regarding their own protocols, procedures and practice guidelines and the general standards of care in the community. Special Circumstances Peer Review may also be granted to non-MCCPM members. The SCRCP is generally initiated by midwife self-report, however, the BOD may request a Special Circumstances Peer Review of an MCCPM member.
 - A. Panel Selection: The panel is composed of midwives who meet NARM Preceptor requirements. Panel participation is voluntary and there is no term limit for participation. Every two years, the SCRCP Facilitator will remind members of the opportunity to serve.
 - 1. The Sentinel Event Committee is comprised of the SCRCP Facilitator and three other midwives.
 - 2. The requesting midwife has the right to ask for a replacement panelist if they are not comfortable with a sentinel event committee member. The SCRCP Facilitator will then organize another midwife to join the panel. Likewise, a midwife should recuse themselves from the panel if they have any conflict regarding the case being reviewed.
 - 3. The SCRCP Facilitator will keep a record of sentinel event submissions and reviews.
 - B. When a self-report form is submitted: the Special Circumstances Review Process (SCRCP) Facilitator organizes a panel to evaluate the case and determine if a full review is needed. No sentinel event case will be denied if a review is requested by the midwife.
 - C. If a full review is indicated the panel, along with the SCRCP Facilitator, and any other additional community members invited by the midwife requesting the review, will analyze the redacted chart and will convene, either in person or via teleconference, to discuss the case.
 - 1. It is recommended that any students and/or assisting midwives involved in the case be included in the review meeting, and may be interviewed separately by the panel.
 - 2. The meeting should take place within 2 weeks after distribution of the redacted chart.
 - D. Results: The panel interprets and summarizes their findings to the midwife, and in some cases, asks the midwife to submit recommended revisions of policies or practice guidelines, attend continuing education on particular topics, and/or organize additional peer reviews beyond what is required by MCCPM. The SCRCP facilitator will send all midwives who have a full case review, documentation that the sentinel event was reviewed by the MCCPM Sentinel Event Committee. The SCRCP Panel will furnish a statement of completion to the midwife for inclusion in their case chart.

1. Recommendations made at a Special Circumstances Peer Review may warrant a follow up meeting at the discretion of those in attendance.
2. The midwife must submit written documentation demonstrating their completion of the recommendations made during peer review, if applicable.
3. In situations where the midwife's actions were willingly negligent, dishonest, or fraudulent, or they have not demonstrated compliance with previous recommendations, their membership to MCCPM will be revoked and NARM will be notified.

VI. Aggregate Community Sentinel Event Reporting

- A. At each quarterly MCCPM meeting, the SCRPFacilitator will verbally report the number and type of sentinel events that have been reviewed in the past quarter.
- B. This report will take place during the confidential peer review portion of the meeting, and will not be recorded in the minutes.
- C. This report will not disclose the details of any individual case, and will maintain the anonymity of the midwives and clients involved in the events.
 1. The data can be provided on a confidential basis to a member who was not at the meetings by calling the SCRPFacilitator.
 2. In order to protect MCCPM and the Special Circumstances Peer Review process, at no time, and under no circumstances, is this information to be transmitted in any written format.

VII. Sentinel Events Requiring a Report to the SCRPFacilitator. The self-report form should be submitted within 14 days of the Sentinel Event. The form will be reviewed by the Panel, and the midwife will be notified within 2 weeks if a panel review is required. The midwife will then furnish a redacted copy of the complete chart.

- A. Sentinel Events Requiring a Report to the QMP Facilitator include:
 1. Midwife Request
 2. Emergent Transport
 3. Maternal Hospitalization requiring treatment for infection or blood transfusion
 4. Maternal, Perinatal, or Neonatal Death
 5. Uterine Rupture
 6. Maternal or Neonatal Seizure
 7. Uterine Inversion
 8. NICU or Special care nursery admissions within 72 hours of birth (except for observation &/or congenital anomalies)
 9. Deviation from MCCPM Standards of Care resulting in physical or psychological trauma

Article IX Funding

- I. Members requesting funding must do so with a written request to the BOD.
- II. Decisions about funding will be made by the BOD, and the member will be notified of the decision and amount in writing.

- III. MCCPM is a non profit organization. Upon dissolution, any MCCPM assets will be donated to FAM (Foundation for the Advancement of Midwifery).
- IV. MCCPM funding year ends in December.

Article X MCCPM Media

The website is updated quarterly by a designated MCCPM member. Active MCCPM member midwives are eligible to be listed under 'Finding a Midwife', on the website. Quarterly meetings and public documents are to be listed and updated on the 'about MCCPM' section.

Article XI Voting

Section 1. Bylaw Changes

- I. Both the BOD and the members have the power to amend these bylaws.
- II. These articles and bylaws may be amended by emailing suggested amended revisions to the secretary at least 2 weeks prior to a meeting, adopting a resolution, setting forth the amendment, and by the board providing written notice of the proposed amendments to the membership at least one week prior to a duly called meeting.
- III. Such an amendment shall require an affirmative vote of the majority of the voting membership body and an affirmative vote of the majority of the BOD.

Section 2. Passing Amendments

- I. All votes (bylaw changes or otherwise) shall require an affirmative vote of the majority of the voting membership body present for the vote and an affirmative vote of the majority of the BOD.

Section 3. Counting Votes

- I. Votes are to be counted and tracked by the Secretary and Membership Coordinator, or other designated BOD member.

Section 4. Proxies.

- I. For essential votes, such as bylaw changes or board position changes, votes are always allowed by proxy. Items up for vote must be announced to the membership by the Secretary at least one week prior to the meeting. Proxy votes should be sent to the secretary by the start of the meeting.
- II. Items that can be voted on by proxy should be clearly identified in agendas sent out, including contact info for the Secretary. If wording is changed at the meeting, then proxy votes cannot be applied, and an email vote would be held with the finalized wording.
- III. When the BOD needs to make decisions, they can determine if the vote will include non-attending members or not. For sensitive voting matters, the BOD has the option to call for an anonymous vote.