



Advisory Board on Midwifery

Virginia Board of Medicine

June 7, 2024

10:00 a.m.

Advisory Board on Midwifery
Board of Medicine
Friday, June 7, 2024 @ 10:00 a.m.
9960 Mayland Drive, Suite 201, Henrico, VA
Training Room 2

	Page
Call to Order – Rebecca Banks, LM, Vice Chair	
Emergency Egress Procedures – William Harp, MD	i
Roll Call – Beulah Archer	
Introduction of Members – Rebecca Banks, LM	
Approval of Minutes of June 16, 2023	1 - 4
Adoption of the Agenda	
Public Comment on Agenda Items (15 minutes)	
New Business	
1. Report on Status of Regulatory Actions Erin Barrett	5
2. Discussion Regarding Number of Complaints Filed Pertaining to Midwifery Ildiko Baugus	-- --
3. Orientation to the Board of Medicine and Advisory Board..... Dr. Harp	6 – 37

Announcements:

Next Scheduled Meeting - October 11, 2024 @ 10:00 a.m.

Adjournment

PERIMETER CENTER CONFERENCE CENTER
EMERGENCY EVACUATION OF BOARD AND TRAINING ROOMS
(Script to be read at the beginning of each meeting.)

PLEASE LISTEN TO THE FOLLOWING INSTRUCTIONS ABOUT EXITING THESE PREMISES IN THE EVENT OF AN EMERGENCY.

Training Room 2

In the event of a fire or other emergency requiring the evacuation of the building, alarms will sound.

When the alarms sound, leave the room immediately. Follow any instructions given by Security staff

Exit the room using one of the doors at the back of the room. **(Point)** Upon exiting the doors, turn **LEFT**. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

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**ADVISORY BOARD ON MIDWIFERY
Minutes**

June 16, 2023

The Advisory Board on Midwifery met on Friday, June 16, 2023, at 10:00 a.m., at the Department of Health Professions, Perimeter Center; 9960 Mayland Drive, Henrico, Virginia, 23233.

MEMBERS PRESENT: Ami Keatts, M.D. - Chair
Rebecca Banks, CPM, -Vice-Chair (Joined Remotely)
Erin Hammer, CPM
Ildiko Baugus, CPM

MEMBERS ABSENT: None

STAFF PRESENT: William L. Harp, M.D. Executive Director
Michael Sobowale, LLM., Deputy Executive Director, Licensure
Erin Barrett, JD, Director of Legislative and Regulatory Affairs
Colanthia Morton Opher, Deputy Executive Director, Administration
Roslyn P. Nickens, Licensing Supervisor
Beulah Baptist Archer, Licensing Specialist

GUESTS PRESENT: Marinda Schindler, Virginia Midwives Alliance

CALL TO ORDER

Dr. Keatts called the meeting to order at 10:04 a.m.

EMERGENCY EGRESS PROCEDURES

Dr. Harp announced the emergency egress instructions.

ROLL CALL

Roll was called; a quorum was established.

APPROVAL OF MINUTES

Ildiko Baugus moved to approve the minutes of the September 23, 2022 meeting. Rebecca Banks seconded. The motion passed.

ADOPTION OF AGENDA

Dr. Keatts considered a request to accommodate Erin Barrett's presentation of items on the agenda first so she could attend other scheduled meetings. Ildiko Baugus moved to adopt the meeting agenda with the accommodation requested. Erin Hammer seconded. The motion passed.

PUBLIC COMMENTS

None

NEW BUSINESS

1. Report on Status of Regulatory / Policy Actions

Erin Barrett presented on the status of the regulatory actions for the Advisory.

2. Draft Revised Guidance Document 85-10

Erin Barrett discussed the revisions made to the Guidance Document on high-risk disclosures by licensed professional midwives for high-risk pregnancy conditions at the May 18, 2023 Ad-Hoc Committee meeting. The revised Guidance Document will not be ready for presentation at the June full Board meeting but will be presented at the August Board of Medicine Executive meeting.

Erin Hammer pointed out that a reference citation, "*(Price 2014)*", found on page 24 in the revised Guidance Document should be stricken from the document.

At the end of the discussion, Ms. Baugus moved to recommend that the Board vote to adopt the revisions made to Guidance Document 85-10. Ms. Hammer seconded. Motion passed unanimously.

3. **SB1275**

Dr. Harp informed the Advisory that a meeting is being planned for the month of July to be chaired by a member of the full Board, and comprising of licensed midwives and a medical doctor from the advisory board, a licensed midwife from the community, and medical doctors in the community of OBGYNs to come up with best practices as the law requires.

In response to a question from Ildiko Baugus as to what midwives will be able to do under this law beginning July 1, 2023, Erin Barrett stated that the Executive Committee of the Board should be able to issue formulary and offer best practices to certified midwives in August.

Announcements

Licensing Statistics

Beulah Archer reported a breakdown of the licensing statistics for licensed professional midwives as of June 16, 2023, as follows:

Current active in Virginia	77
Current Active Probation	1
Current Active- Out of state	33
Inactive Out of state	1
<hr/>	
Total for Licensed Midwife	112

Next Scheduled Meeting

October 6, 2023, at 10:00 a.m.

Adjournment

With no other business to conduct, Dr. Keatts adjourned the meeting at 10:37 a.m.

Board of Medicine – Advisory Board on Midwifery

Regulatory Actions

May 2024 Update

In the Governor’s Office

None.

In the Secretary’s Office

VAC	Stage	Subject Matter	Submitted from agency	Time in current location	Notes
18VAC85-130	Fast-track	Implementation of changes following 2022 periodic review of Chapter	10/6/2022	353 days	Periodic review changes voted on at 2022 October Board meeting
18VAC85-130	Fast-track	General disclosure requirement amendment consistent with statutory changes	10/23/2023	21 days	Changes regarding disclosures were made at the October 2023 full Board meeting

At DPB or OAG

None.

Recently effective/awaiting publication

None.

Orientation
to the Board of Medicine &
Your Advisory Board

June 2024

Executive Branch

- Governor Glenn Youngkin
- Secretary of Health and Human Resources – John Littel
- DHP Director – Arne Owens
- Board of Medicine President – Randy Clements, DPM
- Board members cannot speak for the Board or anyone in the Executive Branch.

Department of Health Professions

- Umbrella Agency for 13 Health Regulatory Boards
- Director Owens and Deputy Director Jenkins appointed by the Governor
- Administration, Communications, Finance, Enforcement, Administrative Proceedings, Prescription Monitoring, Health Practitioners' Monitoring, Healthcare Workforce Data Center, IT
- Medicine joined the Department in 1977

Today's Board of Medicine

18 members
appointed by
the Governor

1 MD from each
Congressional
District

1 DO

1 DPM

1 DC

4 citizen
members

Today's Board

- Pure Board of Medicine
- Composite Board
- Doctors of Medicine, Osteopathy, Podiatry & Chiropractic
- Physician Assistants, Acupuncturists, Athletic Trainers, Licensed Midwives, Licensed Certified Midwives, Occupational Therapists, Occupational Therapy Assistants, Radiologic Technologists, Radiologic Technologists-Limited, Radiologist Assistants, Respiratory Therapists, Polysomnographic Technologists, Behavior Analysts, Assistant Behavior Analysts, Genetic Counselors, Licensed Surgical Assistants, Certified Surgical Technologists & Advanced Practice Registered Nurses

Today's Advisory Boards

Today's Advisory Boards

- 11 Advisory Boards
- Similar structure & function
- 5 members
 - 3 of the profession
 - 1 physician
 - 1 citizen member

Today's Advisory Boards

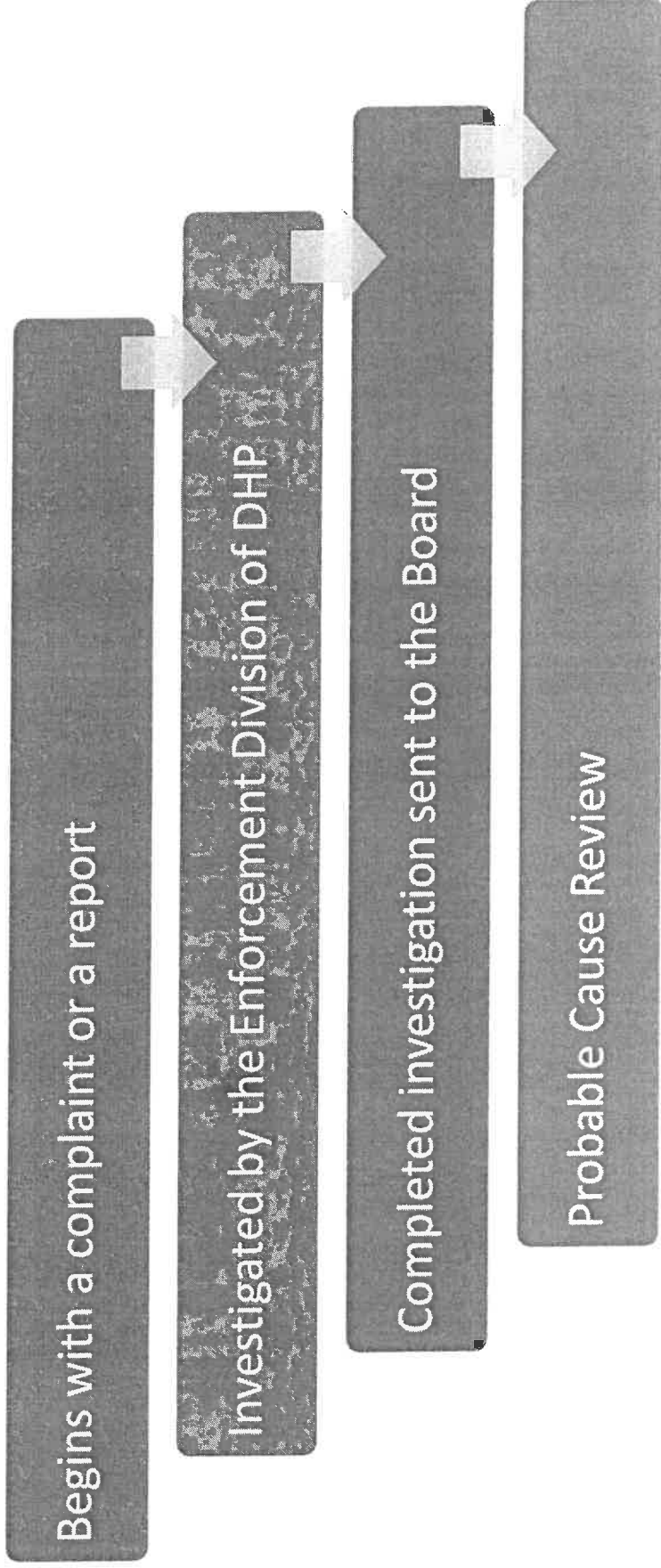
Today's Advisory Boards (cont.)

- Chair & Vice-Chair
- Meets at least once a year
- May attend 1 meeting a year
virtually for good cause
- Advise the Board of Medicine on:
 - Licensing
 - Discipline
 - Regulations

THE BOARD'S MISSION

- The protection of the public
- License only qualified applicants
- Discipline for unprofessional conduct
- Promulgate regulations to implement law

THE BOARD'S DISCIPLINARY PROCESS



PROBABLE CAUSE REVIEW



Board staff and Board members



Review to understand what happened in the case



Apply the law and the regulations to determine if a violation has occurred



Two Board members must agree on standard of care



If specialized review is required, retain an expert reviewer for the standard of care

OPTIONS FOR RESOLVING THE MATTER

- 85% are closed administratively
- Other options
 - Advisory letters
 - Confidential Consent Agreements
 - Pre-Hearing Consent Orders
 - Informal Conferences
 - Formal Hearings
 - Summary Suspensions

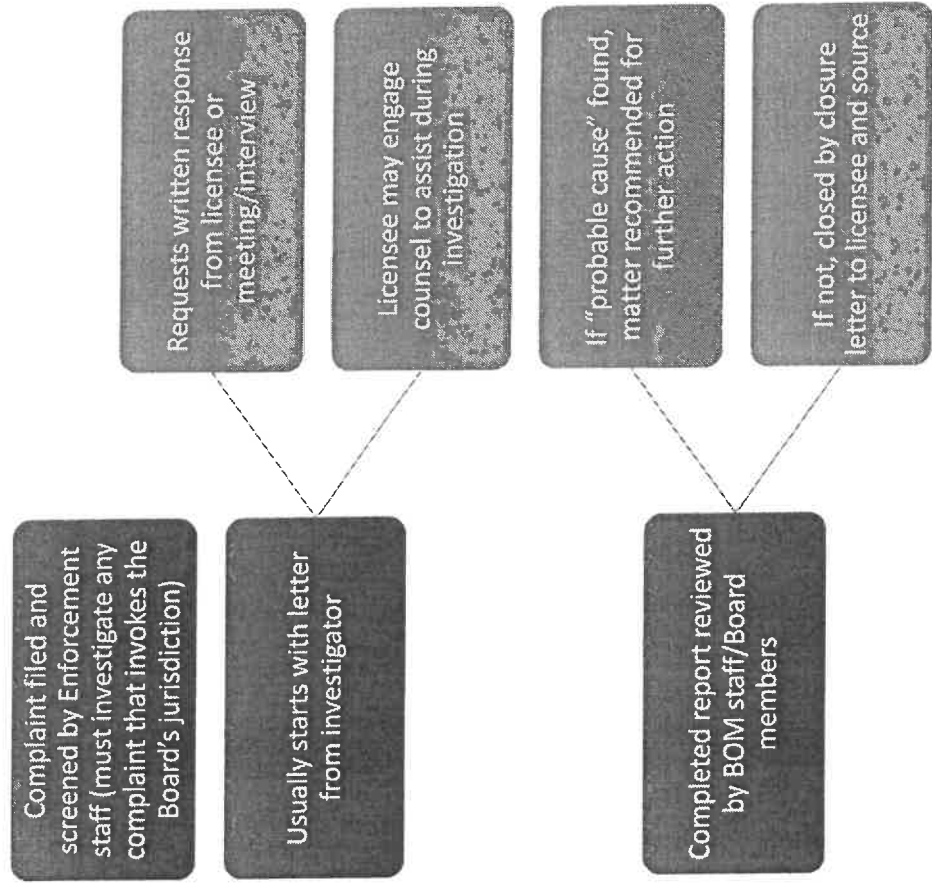
PRINCIPLES OF THE DISCIPLINARY PROCESS

- Confidentiality
- Protection of the public
- Due process
- Proportionate sanctions
- Strive to be fair to all parties

INVESTIGATIONS

- **Who Complains?**
 - The Public (e.g., patients, family members, anonymous, media)
 - Other licensees of the BOM (mandated reporters)
 - Employers
 - Healthcare institutions (e.g., hospital CEO = mandated reporter)
 - Medical malpractice insurance carriers

COMPLAINT PROCESS



ADVICE FOR RESPONDING TO COMPLAINTS

- Take the complaint seriously (even if you believe it to be frivolous)
- Fully cooperate w/the investigator (DHP/BOM is “health oversight agency” under HIPAA)
- You are responsible for ensuring a response and complete records are provided (not your office manager)
- Do NOT contact Board members to discuss your complaint
- Consult with an attorney (familiar with DHP/regulatory boards)

LAWS AND REGULATIONS TO KNOW

Fraud or Dishonesty

Substance abuse

Negligence in practice – standard of care

Mental or Physical Incapacity

Aiding and Abetting Unlicensed Practice

Ethical lapses – standards of professional conduct

LAWS AND REGULATIONS TO KNOW

Felony convictions or misdemeanors of moral turpitude

Any provision of the drug law

Failure to timely sign a death certificate

Opioid prescriptions submitted electronically

Surprise billing

Treating self and family

Patient records

LAWS AND REGULATIONS TO KNOW

Confidentiality

Communication/Termination

Subordinates and Disruptive Behavior

Sexual Boundary Violations

Reporting requirements

Continuing Medical Education

LAWS AND REGULATIONS TO KNOW



Office-Based Anesthesia



Mixing, Diluting or Reconstituting



Prescription Monitoring Program



Health Practitioners' Monitoring Program



Renew License every 2 years

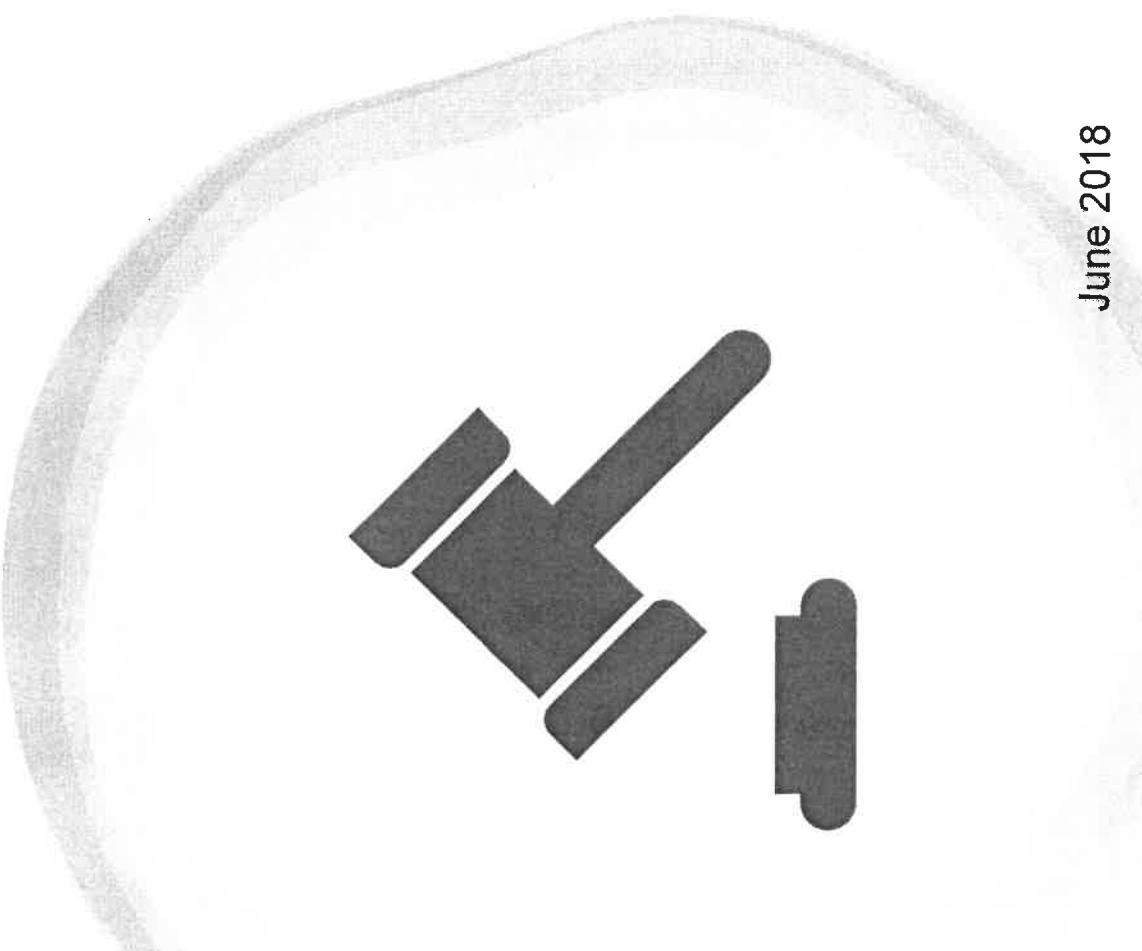
Hearing Protocol

Virginia Board of Medicine

June 14, 2018

Panel Members at Hearings

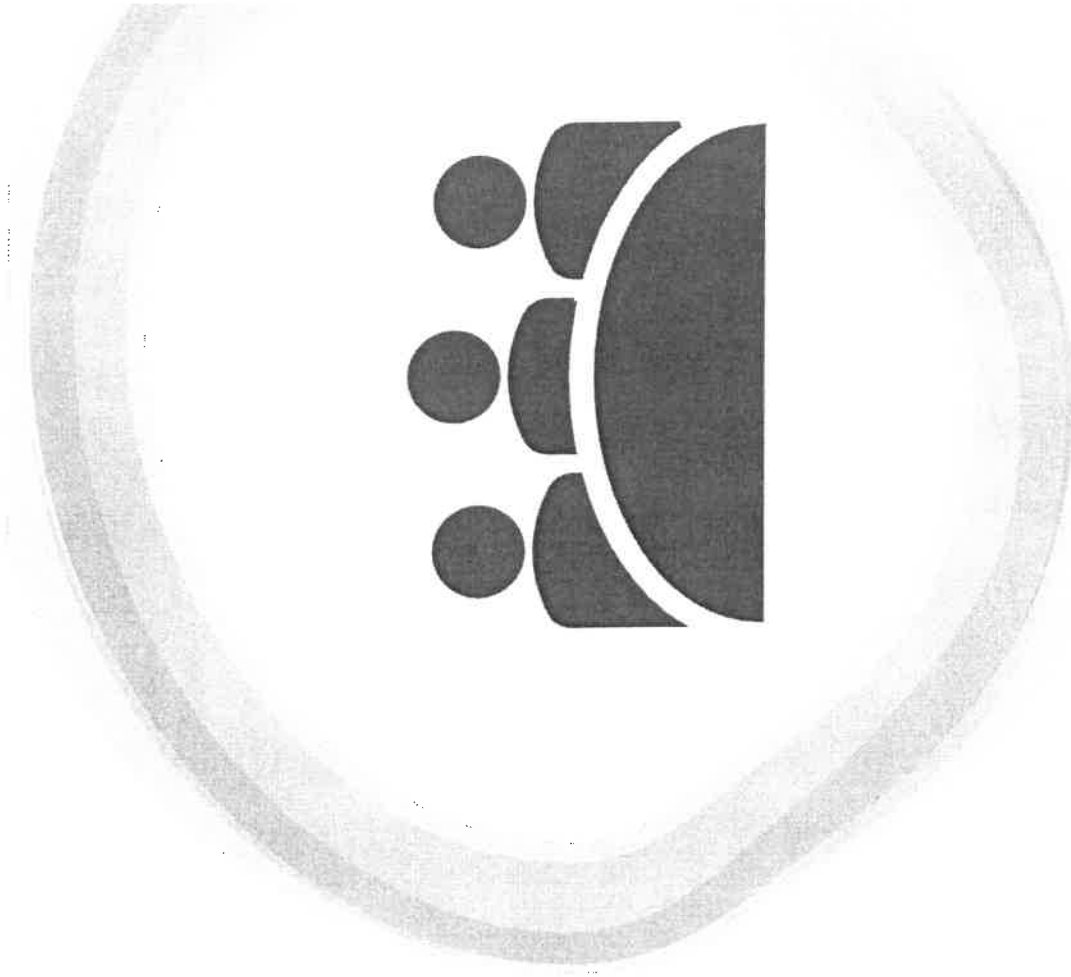
- Purpose of disciplinary proceedings is to protect the public by regulating professional conduct and provide fair and impartial consideration of the matter before the Board
- Panel members should avoid actual conflicts and the appearance of impropriety—if you receive case material and think you have a conflict, call staff! (procedure for potential conflict at hearing)
- Strive to be fair and impartial—goal is fairness to *respondent* and *also to the public*



June 2018

Open vs. Closed Sessions

- Board business takes place in open, public forums to foster public accessibility and confidence of the public in the integrity of the regulatory process
- Any meeting of three or more members of the Board at which the members discuss *anything* related to the Board should be considered an open meeting for FOIA purposes (includes group emails).
- Closed meetings: for the Board to deliberate or receive legal advice
- Disciplinary proceedings may also close to deliberate and to protect health information of a respondent



Formal Hearings— You are on the record!



A court reporter attends formal hearings



Your words are recorded



The transcript will be reviewed by the Circuit Court if the respondent appeals for evidence of violations of a respondent's constitutional rights, failure of the Board to observe required procedure, indications that the Board may not have had substantial evidence (Erin ex.)

June 2018

Hearings (IFC or formal)

- Cannot deviate earlier from noticed start time
- Choose your questions carefully (avoid answering questions from R)
- Hearings can be emotional; avoid engaging on emotional level (try not to be swayed by tears or manipulative behavior)
- Avoid texting board members (e.g., Loudoun meeting; FOIA Council)
- Do not state you have more knowledge than others-- or less-- based on speciality or non-MD status. All board members are experts in the matters before the board. This has been clearly stated by CAV.
- Do not give practice advice—do not want to bind the Board (especially if you are wrong)

Hearings (IFC or formal)

- Questions should relate to facts of the case and the allegations contained in the Statement of Particulars
- Do not sermonize, do not inject personal, religious, or political beliefs
- Do not express your personal opinion (i.e., "Well, I think your record-keeping was fine.")
- Do not argue with other panel members during hearings, or make statements disparaging other members' statements or questions
- Do not argue with witnesses, respondents, or counsel for respondents – we understand it can be hard with some!

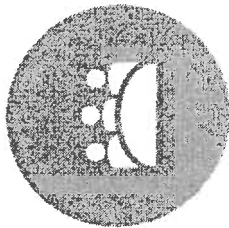
Hearings (IFC or formal)



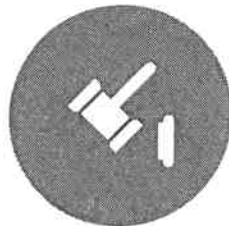
PANEL CHAIR WILL RULE ON ISSUES RELATED TO RELEVANCE OR THE ADMISSION OF EVIDENCE (WITH BOARD COUNSEL GUIDANCE)



AVOID "ATTORNEY TESTIMONY", THIS IS YOUR OPPORTUNITY TO HEAR FROM THE LICENSEE



DELIBERATION HAPPENS IN CLOSED SESSION



DO NOT ENGAGE, INFORM, INSTRUCT ONCE PROCEEDINGS ARE OVER (STAFF WILL HANDLE; E.G. FRIENDLY ATTORNEY AND PATIENT FAMILY IN AUDIENCE)

Procedural mysteries

Board counsel records and enters
evidence

Evidence must be formally admitted
even though Board members
received evidence prior to hearing

Must initial and date evidence to
provide record on appeal.

Procedural mysteries, cont.

Some cases appear old when they reach the formal hearing stage

Can be for any number of reasons (continuances prior to IFC or formal, length of investigation, etc.)

Staff and counsel will answer procedural questions in closed session – NOT open session!

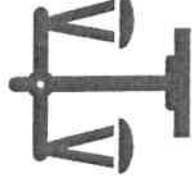
What happens in closed session?



Decision on sanction



Craft order, including findings of fact
(refer to helpful notes you made
during proceeding)



Review conclusions of law alleged;
determine what stays



**What are
grounds
for an
appeal?**

- (1) Violation of a Constitutional right, power, or privilege;
- (2) Failure to comply with statutory authority;
- (3) Failure to observe required procedure where the failure did not result in harmless error; and
- (4) Substantial evidence did not support Board decision.

(Va. Code § 2.2-4027.)

Helping to ensure that the Board's decisions do not get overturned

- Follow staff guidelines, procedures, and scripts for hearings.
- Ask legal questions in *closed session*. Do not state specific legal questions for board counsel on the record. This raises privilege issues.
- Only the chair of a panel may rule on motions made at a hearing.
- Avoid stating opinions on the record (i.e., "That does not sound like a standard of care issue to me.")
- Work with your fellow panel members, board counsel, and staff to craft well thought out orders.
- Be aware that any respondent can appeal.

Carthage

2024 Board Meeting Dates

Advisory Board on:

Behavioral Analysts			10:00 a.m.
February 5	June 3	October 7	
Genetic Counseling			1:00 p.m.
February 5	June 3	October 7	
Occupational Therapy			10:00 a.m.
February 6	June 4	October 8	
Respiratory Care			1:00 p.m.
February 6	June 4	October 8	
Acupuncture			10:00 a.m.
February 7	June 5	October 9	
Radiological Technology			1:00 p.m.
February 7	June 5	October 9	
Athletic Training			10:00 a.m.
February 8	June 6	October 10	
Physician Assistants			1:00 p.m.
February 8	June 6	October 10	
Midwifery			10:00 a.m.
February 9	June 7	October 11	
Polysomnographic Technology			1:00 p.m.
February 9	June 7	October 11	
Surgical Assisting			
February 12	June 10	October 15	