

CONTINUITY OF CARE POLICY

Continuity of care is a fundamental principle of Canadian midwifery practice and is highly valued by clients seeking midwifery services. Continuity of care means that a client's care is provided primarily by the same midwife or small group of midwives throughout pregnancy, labour and birth and the postpartum period. Midwifery practices are organized so that a midwife known to the client is available to attend the birth. Continuity of care enables midwives to develop meaningful therapeutic relationships, mutual understanding and trust with clients. Continuity of care is also an important factor in supporting normal birth and good outcomes.

The *Standards of Midwifery Practice* set out in the Midwifery Regulatory Council of Nova Scotia (MRCNS) Bylaws include:

STANDARD SIX

The midwife ensures continuity of care throughout the childbearing experience.

The midwife:

- 6.1 provides comprehensive midwifery care during the trimesters of pregnancy and throughout labour, birth, and the postpartum period;
- 6.2 ensures, within the team, 24 hour on-call availability to clients;
- 6.3 identifies, within the team, the midwife who is responsible for leading and coordinating the client's care;
- 6.4 makes every effort to ensure that a care provider familiar to the client is available to attend the birth.

In accordance with continuity of care standards, the MRCNS recommends that each midwifery client should be assigned to a primary midwife who will lead and coordinate care. Efforts should be made to ensure that designated midwife partners in the same team provide the majority of the client's care. Under normal circumstances, clients will be attended during labour and birth by one of their designated midwives.

Continuity of care arrangements should support the client's needs and wishes while also allowing midwives to take appropriate off-call time. All midwives involved in the client's care should make the time commitment necessary to become familiar with the client's history and preferences and provide consistent, individualised care and support.

The MRCNS recognises that in some communities, midwives may be providing care together with other maternity care providers in a collaborative practice team.

When a client requests midwifery services, a midwife in the collaborative team should be identified as the provider primarily responsible for leading and coordinating the client's care. Appropriate opportunities should be offered for midwifery clients to meet other care providers in the collaborative team who may be involved in their care.

The MRCNS also recognises that alternate practice arrangements may be needed in sites or communities where the number of midwives is limited and a second midwife may not always be available to cover call or assist at a home birth. Midwifery clients should be informed at the beginning of care about how continuity of care is organized and provided in their community.

Adopted by the MRCNS on November 10, 2009
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