

Teamwork and Collaboration Between Registered Nurses and Registered Midwives

June 2009

Approved by the College and Association of Registered Nurses of Alberta (CARNA) Council, June 2009.

CARNA is operating as the College of Registered Nurses of Alberta (CRNA).

Use of this document is permitted for the purposes of education, research, private study or reference.

Ensure you are using the current version of this document by visiting our website.

College of Registered Nurses of Alberta
11120 – 178 Street
Edmonton, AB T5S 1P2

Phone: 780.451.0043 (in Edmonton) or 1.800.252.9392 (Canada-wide)
Fax: 780.452.3276
Email: practice@nurses.ab.ca
Website: nurses.ab.ca



Table of Contents

INTRODUCTION.....	3
GUIDING PRINCIPLES	4
REFERENCES.....	5



Introduction

The College and Association of Registered Nurses of Alberta (CARNA), the Alberta Association of Midwives (AAM), and the Midwifery Health Disciplines Committee (MHDC, Regulatory Body) represent the professions of midwifery and registered nursing in Alberta. Both professions are regulated under provincial legislation in Alberta. It is the intent that in the future the midwifery profession will come under the *Health Professions Act (HPA)*. Registered Midwives are currently regulated under the *Midwifery Regulation 328/94* pursuant to the *Health Disciplines Act*. Registered midwives are governed by the Midwifery Committee appointed by the Minister of Health and Wellness. Registered nurses are regulated under the *Health Professions Act (HPA)* (2000) and the *Registered Nurses Profession Regulation 232/2005*. The most current versions of the provincial legislation, professional philosophies and scopes of practice are available at www.gov.ab.ca, www.alberta-midwives.com and www.nurses.ab.ca.

Legislation and regulation for both of these professions outline the expectation that registered nurses and registered midwives must meet the standards of practice and provide safe, competent and ethical care to mothers and their babies. Registered nurses (RN) and registered midwives (RM) both have a holistic approach to the care they provide along the childbearing continuum that includes the pre-conceptual period to six weeks postpartum. A collaborative relationship between these two professions is necessary for the provision of high quality care to childbearing women and their babies in both the hospital setting and in the community. This kind of relationship is built on a mutual understanding and respect for each other's roles and responsibilities.

Although RNs and RMs have an overlap in some competencies and areas of responsibility, there are differences in the authorization of restricted activities and the scope of practice for both of the professions. Because of the overlap in competencies, it is important that there is role clarity so confusion about responsibilities or duplication of roles is minimized. A clear description of the role of the RN and the RM recognizes the responsibilities, knowledge and skill of each professional. Without sufficient role clarity there is the potential for tension as both RNs and RMs may feel displaced or resentful that others are taking their roles (Kennedy & Lyndon, 2008).

The practice environment of childbearing care in hospital settings is complex, with relationships among the various health-care professionals who care for women an important part of the equation. The maternity health-care team may include professionals such as family physicians, obstetricians, neonatologists, registered nurses and registered midwives as well as other providers from whom the woman may receive care during her pregnancy, the birth and the post partum period.

CARNA supports the need for positive working relationships between registered nurses and registered midwives and recognizes that registered nurses and registered midwives may practice together at various stages along the childbearing continuum. The following principles are intended to foster collaborative relationships in any setting where registered midwives, registered nurses and the childbearing woman may interact.

Guiding Principles

- Registered nurses and registered midwives know and respect the principles and philosophy underlying the practice of nursing and midwifery.
- There are competencies and interventions that are shared in the scope of practice of registered nurses and of registered midwives, as well as competencies and interventions that are distinct and unique.
- Information relevant to the woman's care is shared appropriately with all providers within the maternity health-care team.
- Informed choices of all childbearing women are respected.
- Communication channels for the resolution of issues and concerns should be clear to both registered nurses and registered midwives in the health-care system.
- Policy or guidelines for resolution of issues and concerns between registered nurses and registered midwives should be discussed by both professions before implementation and be available as a resource in the practice setting. Employers should indicate in policy the process and course of action to take if there is disagreement or conflict and the responsibility of each professional in the situation.
- Registered nurses and registered midwives work together to ensure the smooth transition of midwifery practice into existing maternal and newborn health-care services.

References

Alta. Reg. 232/2005. [*Registered Nurses Profession Regulation*].

Alta. Reg. 328/94. [*Midwifery Regulation*].

Health Disciplines Act, R.S.A. 2000, c. H-2.

Health Professions Act, R.S.A. 2000, c. H-7.

Kennedy, H. P., & Lyndon, A. (2008). Tensions and teamwork in nursing and midwifery relationships. *JOGNN*, 37(4), 426-435.