



Annual Report 2012 - 2013

The College of Midwives of Manitoba wishes to acknowledge the funding provided by the Government of Manitoba Department of Health. This financial support is essential in enabling the College to fulfill its responsibilities while it continues to develop and grow as a regulatory body.



College of Midwives of Manitoba (CMM)

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Front Cover: Infant Fern Imogene Brown-Douziech. Born May 13, 2013. Proud parents are Miriam Brown and Amber Douziech.

Inside Cover: Amber Douziech and Miriam Brown with Fern Imogene Brown-Douziech.

CMM Mission

The purpose of the College is to protect the safety of the public in the provision of midwifery services in Manitoba; to support midwives in the provision of safe and effective midwifery services in Manitoba; and to develop and enforce the standards of midwifery care.

Commitment to Equity

The College is committed to the goal of equity in the practice of midwifery which includes: providing service to women who historically have been under-represented or under-served by the health care system; and recruiting midwives with diverse backgrounds, experience and knowledge. Such recruits may drawn from groups including immigrants and newcomers to the province, visible minorities, Aboriginal persons, persons with disabilities, and persons who live in rural or remote communities.

College Staff

Janice Erickson, BA, RM - Registrar (Non-prac.)

Patty Eadie, BA, BSW- Executive Director

Kathy Kirby - Administrative Officer

Charlotte Onski - Bookkeeper

Governing Council of the College

Kelly Klick, RM.....Chairperson

Janice Erickson, RM (Non-prac.).....Registrar - Ex-officio

Gisele Fontaine, RM.....Elected Council Member

Kari Hammersley, RM.....Elected Council Member

Darlene Birch, RM....Appointed Council Member (Kagike Danikobidan)

Thelma Mason.....Appointed Council member (Kagike Danikobidan)

Shannon Lavell..Appointed Public Representative (from November 2012)

Sheila Mills, RM.....Elected Council Member

Carolyn Markmann.....Appointed Public Representative

Chairperson & Registrar's Report Kelly Klick, RM and Janice Erickson, RM (Non-prac.)

It is our pleasure to provide the annual Chairperson & Registrar's Report for the College of Midwives of Manitoba for the 2012-2013 fiscal year.

Registration

On March 31, 2013 the College had 62 midwives registered (39 practicing and 23 non-practicing). This represents an increase of five in our overall membership; however is a decrease of six in the number of members practising. Of our five new registrants in 2012-13, four were graduates of the Ontario Midwifery Education Program and one was a graduate of the Ryerson University International Midwifery Pre-registration Program (IMPP). In addition, we had eleven student members. We look forward with great anticipation to the time when these student members transition to our register of practising midwives.

Governing Council

The Council of the College is the governing body of the College, and as such manages and conducts the affairs of the College and exercises the rights, powers and privileges of the College. The CMM is a committee-run organization that relies on its membership and arms-length appointed public representatives to make decisions and undertake the activities that make up the CMM's mandate.

Decisions made at the committee level receive their final acceptance via the Council. The commitment that committee and Council members give is reflected in the excellent work done by the CMM. The Council has convened regularly this past year and has reviewed many issues that are important to the membership and other stakeholders.

The focus of this year's discussions and projects included items such as ongoing review of the *Midwifery Regulation*, midwifery education in Manitoba, the *Regulated Health Professions Act*, input into provincial committees such as MMACHS (Manitoba Maternal and Child Healthcare Services), MMAC (Manitoba Midwifery Advisory Council), and Canadian Midwifery Regulators Consortium issues as well as an increased focus and working with Manitoba Health on developing a Manitoba assessment process for internationally educated midwives (IEMs). Midwifery practice was guided and reviewed through the conducting of a random practice audit and approval of new standards.

Council also continued to consider the feasibility of implementing a Midwifery Education Program Approval process for student designed midwifery programs. The impact that this type of process may have on the province's current midwifery education program and on the workload and responsibilities of the College as a regulatory body require comprehensive exploration before a decision to proceed could be implemented.

Canadian Midwifery Regulators Consortium (CMRC)

The College remains a committed and active member of the CMRC, and continues to hold the position of Secretariat. The CMRC is an organization of Canadian midwifery regulators and includes members from all of the currently regulated provinces and territories in Canada. In 2012-13 the CMRC continued to support its ongoing initiatives and projects - the Canadian Midwifery Registration Exam (CMRE), the Multijurisdictional Midwifery Bridging Program (MMBP), consideration of a national approach to the assessment and approval of midwifery education programs and work with the Federal Office of Controlled Substances. In November 2012 changes to the federal *Controlled Substances Act* were approved on a federal level. CMRC members are working together to develop a harmonized set of requirements and standards that are necessary to have in place prior to pursuing the next phase of necessary regulatory changes at the provincial level.

Assessment and Bridging of Internationally Educated Midwives

Assessment and bridging of internationally educated midwives (IEMS) was a significant focus for the CMM and other midwifery stakeholders in Manitoba this year. The Multi-jurisdictional Midwifery Bridging Project (MMBP) continued as an ongoing project of the CMRC. Funding for 2012-13 was secured to offer an accelerated stream only. Nine IEMs participated in the program which included a distance-based portion as well as a three week intensive that took place at University College of the North (UCN) in Winnipeg. Via funding from Health Canada, Manitoba was able to orient and train one midwife as an instructor in the MMBP curriculum, with the goal of developing capacity and expertise to deliver gap training here in Manitoba. The MMBP has been unable to secure ongoing funding beyond this offering and is therefore preparing to suspend operations. Regulators, educators and government in jurisdictions outside of Manitoba are continuing to discuss possible solutions to offer continued assessment and gap training.

Within Manitoba, with the support of Manitoba Health, and in cooperation with UCN, the CMM was able to partner with an external consultant from the Ryerson University International Midwifery Pre-registration Program to develop a one-time Transitional Assessment and Gap Training Process to begin May 2013. This process will inform the development and piloting of a more permanent assessment process early in 2014, with the goal of having a gap training process to follow later in 2014. A three-year funding agreement with Manitoba Health and Health Canada will help to make this a reality.

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Regulated Health Professions Act

The College of Midwives continues to participate in consultations with the Manitoba Government as it rolls out the *Regulated Health Professions Act (RHPA)*. The government's intent with this legislation is to ensure that all 23 regulated health professions in Manitoba are governed under one act, with consistent, uniform regulations with an enhanced focus on patient safety and accountability. The Manitoba Speech and Hearing Association, the College of Registered Nurses of Manitoba and the College of Physicians and Surgeons of Manitoba continued to work on their regulations in 2012-13. The MSHA will be the first to transition to the RHPA.

The CMM has begun consultations to develop a plan to ensure that we engage members and other stakeholders appropriately in this transition. We expect to transition our legislation in the next 5 to 7 years, though no firm timeline has been provided. Although there may be some opportunity for expanding our current scope of practice during this transition, the CMM anticipates that this legislation will not have a dramatic impact on the day-to-day work of midwives, but rather will impact the work requirements and parameters of the College as the regulatory body.

Midwifery Education in Manitoba

The CMM continues to work with the University College of the North, the Council on Post-Secondary Education (COPSE) and Manitoba Health as well as other agencies to achieve the vision of graduating midwifery students from a Manitoba education program that meets the requirements of the College.

Active Midwife Members of Committees, Appointed Public Representatives and Kagike Danikobidan Members

As always it is important at this time of year to recognize the commitment of midwives, appointed public representatives and Kagike Danikobidan members who support the College in so many ways. The College is built on the passion and professionalism of many people. Those who sit on Council and committees are giving of their time and energy in a way that impacts the lives of families, not only their own, but the many families midwives serve. For that we give thanks.



Infant Fern Imogene Brown-Douziech. Proud parents Miriam Brown and Amber Douziech.

Complaints Committee Report Kelly Klick, RM, Chairperson

It is a good sign when the Complaints Committee has had little activity, meaning concerns about midwifery practice in Manitoba that is unprofessional, unsafe or unethical have not been received at the CMM. This year one former case was closed and one new one was opened and closed. Our committee provided input into the presentation at the CMM AGM regarding trends found through Quality Assurance audits, Perinatal Reviews and Complaint cases from the beginning of regulated midwifery. To look back to when we started and to see that midwives are providing safe, high quality maternal and newborn care that is much wanted by their communities was a great exercise to help us pinpoint those areas that can be further strengthened.

COMMITTEE MEMBERS

Kelly Klick, RM
Erin Eleuterio (Appointed Public Representative)
Lara Petkau, RM
Carol Griffin, RM

Committee to Select Public Representatives Report Kelly Klick, RM, Chairperson

The College said good-bye to a number of Appointed Public Representatives this year as their terms ended and welcomed new ones onto our Council and committees.

We will miss the following Public Representatives who served on the Council and various College committees:

- ◆ Terri McKenzie-Council of the College & Complaints Committee
- ◆ Erin Eleuterio-Council of the College & Complaints Committee
- ◆ Tanya Jonasson-Committee to Select Public Representatives (Appointed by the Women's Health Clinic)
- ◆ Kirsten McFarlane-Committee to Select Public Representatives
- ◆ Bibiane Lafleche-Committee to Select Public Representatives (resigned)
- ◆ Lori Peters-Education Committee
- ◆ Andrea Keeping-Committee to Select Public Representatives (resigned)

We welcome the following Public Representatives to the Council and various College committees:

- ◆ Lyn Hotchkiss- Standards Committee
- ◆ Shannon Lavell-Council of the College /Complaints Committee
- ◆ Sara Corrigan-Education Committee
- ◆ Adrienne Ryan-Education Committee (resigned due to move from province)
- ◆ Danielle Bajus- Standards Committee
- ◆ Trina Larsen-Committee to Select Public Representatives (Appointed by the Women's Health Clinic)

Public Representatives are very important in the way that the College stays transparent and committed to serving our diverse community of Manitoba.

COMMITTEE MEMBERS

Kelly Klick, RM (Chairperson)
Kirsten McFarlane, (Rural Appointed Public Representative Member)
Tanya Jonasson (Member appointed by the Women's Health Clinic)
Erin Eleuterio (Appointed Public Representative Member)
Andrea Keeping (Appointed Public Representative) (Resigned)
Tracey Novoselnik, RM (Non-prac.)

**Education Committee Report
Janice Erickson, RM, (Non-prac.)
(Acting Chairperson)**

The Education Committee met four times in 2012-2013. The Education Committee continued to support the UCN Bachelor of Midwifery Program (BMP) as it worked to stabilize its program. In May of 2012 BMP staff and the CMM Education Committee members reviewed the revised BMP curriculum together, and the CMM provided comments on the Program's direction. Another major focus of the Committee this year included developing and enacting a plan for review and approval of the BMP. This review is ongoing.

Early in 2013 the Education Committee was also involved in supporting a transitional assessment and gap training process for internationally-educated midwives. The process was intended as a one-time endeavor, and may inform development of future, more permanent assessment and gap training options in Manitoba for internationally educated midwives.



Nathalie Pambrun, RM and Darlene Birch, RM gave a presentation to midwives enrolled in the Multi-jurisdictional Midwifery Bridging Program (MMBP) and students of the University College of the North (UCN). March 4, 2013.

COMMITTEE MEMBERS

Carolyn Nykiforuk, RM

Kari Hammersley, RM

Sara Corrigan (Appointed Public Representative)

Adrienne Ryan (Appointed Public Representative)

Board of Assessors Committee Report Sheila Mills, RM, Chairperson

The Board of Assessors has approved five midwives for registration this fiscal year. The midwives registered came via various routes including Canadian midwifery education programs, and the International Midwifery Pre-Registration Program. We're very pleased to welcome them all to Manitoba.

The committee has drafted a policy for new registrants from Canadian midwifery education programs to be approved by Council in 2013.

Thank you to the committee members and our valuable Public Representatives for a year of work well done!

COMMITTEE MEMBERS

Sheila Mills, RM
Janet Macaulay, RM
Cara McDonald, RM
Marla Gross, RM (Non-prac.)
Mary Beens (Appointed Public Representative)

Perinatal Review Committee Report Gisele Fontaine, RM, Chairperson

The purpose of the Perinatal Review Committee is to contribute to the monitoring and improvement of the quality of midwifery care in Manitoba by reviewing individual midwifery cases and recommending continuing education to midwives. The committee met three times this fiscal year and reviewed six of seven newly referred cases (six referred by midwives and one by the Perinatal Morbidity and Mortality Committee of the St. Boniface Hospital). A highlight for the Committee this year was the inclusion of all perinatal committee case review outcomes in the "Reflective Practice Event: What Have We Learned From the Past 13 Years of Audits, Complaints and Perinatal Review?" that took place at the CMM AGM on June 14. Please see the Quality Assurance Committee Report for more details.

COMMITTEE MEMBERS

Gisele Fontaine, RM
Lingou Chen, RM
Lara Petkau, RM
Abigail T. Larson, RM
Sari Fogg, RM (resigned September 2012)
Dr. Ferd Pauls

Standards Committee Report Joelle Ross, RM, Chairperson

The Standards Committee is responsible for reviewing the practice standards of the College, conducting periodic practice audits and ensuring that the needs of the community are met by the College and its members.

Practice Standards revised by the Standards Committee and approved by Council:

- ◆ Guideline for Management of Pregnancy Beyond 41 Weeks Gestation (June 2012)

Practice Standards revised by the Standards Committee and are currently under review of Council:

- ◆ Standard for Continuing Competency in Cardiopulmonary Resuscitation

Priority Practice Standards/Policies/Guidelines being drafted or revised by the Standards Committee for the next year include:

- ◆ New Registrant's Policy
- ◆ Guideline for Vaginal Birth After One Previous Low Segment Caesarean Section
- ◆ Water Birth Guideline
- ◆ Code of Ethics
- ◆ Policy on Fetal Health Surveillance

COMMITTEE MEMBERS

Joelle Ross, RM
Jocelyne Anderes, RM (Non-prac.)
Daniele Bajus (Appointed Public Representative)
Darlene Birch, RM
Gisele Fontaine, RM
Marla Gross, RM (Non-prac.)

Thank you Standards Committee for all of your hard work!

Quality Assurance Committee Report Rebecca Wood, RM, Chairperson

This past year the Quality Assurance Committee organized and conducted one random midwifery practice audit. A primary focus this year was to lead a review of all the recommendations that have arisen from Random Practice Audits, Complaints Committee submissions and Perinatal Review Committee case deliberations. The Chairpersons from each of these respective committees and two representatives from the Quality Assurance Committee conducted a study and revised all recommendations from the past 13 years of regulated practice. Each recommendation was separated from its case, and then grouped into themes. The themes were reviewed and consolidated into the following headings:

1. Informed Choice Discussions
2. Medications
3. Communication
4. Postpartum Care
5. Fetal Health Surveillance
6. Transports to Hospital
7. Standard for Indications for Discussion, Consultation, and Transfer of Care
8. Midwifery Practice Group
9. Out of Hospital Birth
10. Protocols
11. Documentation

We called ourselves the "Recommendations Group" and we entitled the presentation/workshop "*Reflective Practice Event: What Have We Learned From the Past 13 years of Audits, Complaints and Perinatal Review?*"

A workshop was conducted at the 2012-2013 Annual General Meeting where the "Recommendations Group" presented the findings using Rolfe's Model of reflective practice asking what happened, what was learned and what can we do now?

Lists of quality assurance and continuing education activities were compiled from ideas from those members in attendance. A summary report of the findings will be distributed in the near future.

The Quality Assurance Committee has recently added two new members. Our goal for the next year is to review and revise the Quality Assurance Standards and the components of the CMM Quality Assurance program. A survey soliciting member's input into the Quality Assurance program was circulated at the AGM and by email. The feedback from members will be taken into consideration as the Committee reviews the documents and expected activities.

COMMITTEE MEMBERS

Rebecca Wood, RM (Chairperson)
Julia Allen, RM (Non-prac.)
Baileigh Kaptien, RM
Darlene Mulholland (Appointed KD Representative)
He Hu, RM

Kagike Danikobidan (KD) Report
Freda Lepine, Chairperson
Darlene Birch, RM, Co-Chairperson

Tansi Nitotamak (Hello my relatives)

I am submitting this report with some sadness as the Kagike Danikobidan Committee has only had one opportunity to meet this year, although some of our members sit on other agencies and organizations, committees regarding midwifery and the interests of Aboriginal women and families. We have had a hard time staying in touch this year.

We purchased two Tikinagans, and named "Adele", after an Aboriginal elder midwife who was recognized internationally, and the other "Florence", after Florence Klassen, RM who was part of the original Kagike Danikobidan group, and Florence Hamilton, who was an Aboriginal midwife in the north.

We have tried to rectify the issues with the KOBP program and the fact that it is being taught in the South with only two Aboriginal participants attending has been worrisome for us. The program was originally set up for Aboriginal women to get their midwifery training in the North. There is still no Advisory Committee attached to the program; students need to have a voice in that program, and a safe group to be able to voice their opinions. The other issue we believe is that the programs' Aboriginal component was being slowly decreased, thus students not learning the Aboriginal cultural way of midwifery.

We have Kagike Danikobidan members that sit on other committees such as Maternal Child Health Programs, FASD Committees, and CMM Council and committees such as Education, Standards and Quality Assurance as well as the Executive Committee for the College of Midwives. Each committee member reports back to the Kagike Danikobidan Committee as a whole. One of our members also sits on the National Aboriginal Council of Midwives and shares the information with our members. One of the projects was to meet with communities and develop a tool box for midwifery, looking at all requirements for communities to be able to have a midwife and working out the logistics of jurisdictional issues, birth numbers, by-laws of hospitals/health authorities etc.

We worked at length to ensure our remaining student received the support she required to finish her training; if she succeeds she will be graduating in June of 2013, which will be a huge accomplishment for all of us!

We continue to lobby, advocate and speak up wherever possible to ensure Aboriginal midwifery continues as it is still a priority for us while we wait for the jurisdictional issues to be resolved.

We are hopeful that the new year will be more productive and that someday we will reach our goal of births "in the community". We are grateful to all those who support the growth of Aboriginal midwifery and those who support and assist our KOBP students.

Ekosi,

Freda Lepine, Chairperson

Darlene Birch, Co-Chairperson

We purchased two Tikinagans, and one named "Adele", after an Aboriginal elder midwife who was recognized internationally, and the other "Florence", after Florence Klassen, RM who was part of the original Kagike Danikobidan group, and Florence Hamilton, who was an Aboriginal midwife in the north.



COMMITTEE MEMBERS

Freda Lepine, (Chairperson)

Darlene Birch, RM (Co-Chairperson)

Maggie Flett/Alternate: Ruth Ellen Flett

Darlene Mulholland

Audrey Fourre (Former Student rep)

Doris Young

Nelliane Cromarty/Alternate for Thelma Mason

Sandy Howard, RM

Canadian Midwifery Regulators Consortium (CMRC) Report Kris Robinson, RM, Chairperson

It gives me great pleasure to submit this report regarding the activities of the Canadian Midwifery Regulators Consortium (CMRC) to the membership of the CMM.

The 2012-2013 year will be the sixth year that the College of Midwives of Manitoba has had the honor of providing administrative leadership and support to the CMRC as the CMRC Secretariat. As the national body that represents midwifery regulatory authorities (provincial and territorial colleges and committees) the CMRC has a key role in strengthening the practice and regulatory framework of midwifery in Canada as well as supporting a goal of pan-Canadian midwifery regulation. At the CMRC member meeting in St. John's Newfoundland in October 2012, Consortium members unanimously endorsed the Chairperson and Secretariat to continue to lead the organization for another term of three years.

Summary of CMRC Activities 2012-2013

Labour Mobility - CMRC members continue ongoing activities to ensure compliance with the Agreement on Internal Trade (AIT) including ongoing communication and cooperation between all members to ensure that public safety is not comprised as greater mobility of midwifery resources is supported (national in-person meetings and regular teleconferences).

Supporting Regulatory Efforts in Unregulated Provinces and Territories - There are three remaining jurisdictions which are not yet regulated; Newfoundland & Labrador, Yukon Territories and Prince Edward Island. At the CMRC meeting in Newfoundland the government of Newfoundland announced the appointment of a team of consultants whose mandate was to make recommendations regarding the implementation of midwifery in Newfoundland. Members of the CMRC held a special meeting with midwives from Newfoundland and PEI while in St. Johns with the purpose of exploring ways the CMRC could be of assistance in supporting their local efforts. In the case of PEI, support was provided for a plan to develop an application for designation as regulated profession in the Umbrella Health Professions Regulation of PEI. In the Yukon Territories there are continuing discussions within government regarding the regulation of midwifery. When asked, the CMRC acts as a resource to these jurisdictions, drawing on the extensive regulatory experience of its members.

Assessment and Bridging of Internationally Educated Midwives (IEMs) - The CMRC has a long history of supporting the efforts for the assessment and bridging of IEMs. This began in 2005 with the National Assessment Strategy and continued with the development of the Multijurisdictional Midwifery Bridging Program (MMBP). The operations of the MMBP will be suspended later in 2013. In February 2013 the CMRC, with the support of the Government of Saskatchewan held a meeting in Regina with partners from educational institutions, regulators and government officials to discuss options for developing sustainable options for a pan- Canadian approach to assessment and bridging of IEMs. The report of this meeting is available from the CMM.

Supporting Development of National Midwifery Policy (Government of Canada) - To date there is no official office responsible for the development of midwifery policy in Canada. In 2011 the CMRC, CAM and NACM formed a working group whose primary efforts would be to work towards greater recognition of midwifery at a federal level. This working group continues to explore ways to work with key stakeholders/supporters to raise the profile of midwifery as a critical resource in improving maternal and newborn care in Canada, and as an integral component of health human resource planning for Canada.

Federal Office of Controlled Substances - In November 2012, midwives became designated in the federal *New Classes of Practitioners Regulation*. This important regulatory change represented a key achievement for the CMRC as members have been actively involved in efforts to allow midwives limited prescribing rights for controlled substances for many years. The CMRC has developed national standards for midwives to independently prescribe, order and administer controlled substances to women and, where indicated, the newborns in their care, as designated under federal and provincial/territorial regulation. These standards will be implemented pending amendment of provincial and territorial regulations

College of Midwives of Manitoba (CMM) Annual Report 2012-2013

International Congress of Midwives Activities - The Chairperson of the CMRC was reappointed as a member of the ICM Regulation Committee for 2012-2015. The work of the ICM Regulation Committee will continue in 2012-2015 with a focus on the development of a guide for implementing the global standards for midwifery regulation throughout the world. The guide and tool kit, which will be shared at the ICM International Congress Regulation Workshop in Prague, Czechoslovakia in June 2014.

Related ICM Presentations by the Chairperson of the CMRC

ICN, ICM, WHO - Triad Meetings - Geneva, June 2012 - *Canadian Midwifery and Nursing - Perspectives on Health Systems Strengthening and Collaboration*

Canadian Association of Midwives Annual Meeting - St. John's Newfoundland, October 2012 - *A Global Framework to Strengthen Midwifery: Competencies, Regulation, Education and Associations*

CMRC Goals for 2013-2014

Development of a national approval process for Canadian midwifery education programs.

Development of a plan for incorporation of the CMRC.

Development of a strategy to ensure sustainability of bridging programs for internationally educated midwives.

Continued support for the development of midwifery regulation in the Yukon, PEI and Newfoundland.

Continued efforts with the ICM to support midwifery regulation in all areas of the world through involvement on the ICM Regulation Committee (2012-2015).

This will include the development of a tool kit for Implementation of the Global Standard for Regulation and the development of a regulation workshop at the ICM Congress in Prague, June 2014.

At this time I would like to say a special thank you to Patty Eadie who acts as the Secretariat Officer of the CMRC for her ongoing support in this very important role. Patty is vital to the effectiveness of the CMRC, providing meticulous attention to detail and professional support to our organization. Thanks to Kathy Kirby for her assistance with the important administrative activities of the CMRC and finally to Janice Erickson who is a valuable member on the Executive of the CMRC.

**COLLEGE OF MIDWIVES OF
MANITOBA**

Financial Statements
For the years ended March 31, 2013 and 2012

COLLEGE OF MIDWIVES OF MANITOBA

Financial Statements

For the years ended March 31, 2013 and 2012

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Independent Auditor's Report

To the Members of COLLEGE OF MIDWIVES OF MANITOBA

We have audited the accompanying financial statements of COLLEGE OF MIDWIVES OF MANITOBA, which comprise the statement of financial position as at March 31, 2013, March 31, 2012 and April 1, 2011 and the statements of changes in net assets, operations and cash flows for the years ended March 31, 2013 and 2012, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of COLLEGE OF MIDWIVES OF MANITOBA as at March 31, 2013, March 31, 2012, and April 1, 2011 and the results of its operations and its cash flows for the years ended March 31, 2013 and 2012 in accordance with Canadian accounting standards for not-for-profit organizations.

BDO Canada LLP

Chartered Accountants

Winnipeg, Manitoba
June 14, 2013

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COLLEGE OF MIDWIVES OF MANITOBA
Statement of Financial Position

March 31	March 31	March 31	April 1
March 31	2013	2012	2011
Assets			
Current Assets			
Cash and short-term investments	\$ 100,094	\$ 112,615	\$ 113,271
Accounts receivable	27,512	35,567	7,997
Prepaid expenses	3,569	3,905	3,581
	<u>131,175</u>	<u>152,087</u>	<u>124,849</u>
Capital assets (Note 3)	3,210	5,431	7,283
	<u>\$ 134,385</u>	<u>\$ 157,518</u>	<u>\$ 132,132</u>

Liabilities and Net Assets

Current Liabilities			
Accounts payable and accrued liabilities	\$ 21,000	\$ 59,873	\$ 24,478
Deferred Contributions			
Accreditation, Approval and Standards Review (Note 4)	6,785	5,535	12,997
Complaints and Investigation (Note 5)	96,665	91,665	89,482
Personnel Committee	-	-	2,000
Standards Quality Assurance	-	-	3,000
Public Education (Note 6)	500	500	500
Umbrella Health Legislation (Note 7)	4,600	3,100	3,100
Registration Software (Note 8)	2,500	-	-
Move to Vacant Office (Note 9)	3,000	-	-
Strategic Planning (Note 10)	1,500	-	-
	<u>115,550</u>	<u>100,800</u>	<u>111,079</u>
	<u>136,550</u>	<u>160,673</u>	<u>135,557</u>
Commitments (Note 13)			
Net Assets			
Net invested in capital assets	3,210	5,431	7,283
Unrestricted	(5,375)	(8,586)	(10,708)
	<u>(2,165)</u>	<u>(3,155)</u>	<u>(3,425)</u>
	<u>\$ 134,385</u>	<u>\$ 157,518</u>	<u>\$ 132,132</u>

On behalf of the Board:

_____ Director

_____ Director

The accompanying notes are an integral part of these financial statements.

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COLLEGE OF MIDWIVES OF MANITOBA
Statement of Changes in Net Assets

For the year ended March 31

	Net Invested in Capital	Unrestricted Net Assets	Total
Balance, March 31, 2011	\$ 7,283	\$ (10,708)	\$ (3,425)
Excess of revenue (expenses) for the year	(3,416)	3,686	270
Invested in capital assets	1,564	(1,564)	-
Balance, March 31, 2012	5,431	(8,586)	(3,155)
Excess of revenue (expenses) for the year	(2,900)	3,890	990
Invested in capital assets	679	(679)	-
Balance, March 31, 2013	\$ 3,210	\$ (5,375)	\$ (2,165)

The accompanying notes are an integral part of these financial statements.

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COLLEGE OF MIDWIVES OF MANITOBA
Statement of Operations

For the year ended March 31	2013	2012
Revenue		
Manitoba Health - general operations	\$ 171,100	\$ 171,100
Manitoba Health - IEHP	19,122	-
Practicing, non-practicing and student members	77,770	67,532
Manitoba Labour & Immigration - CMM & MMBP Website Development	-	44,997
Accreditation, Approval and Standards Review (Note 4)	-	7,462
Standards Quality Assurance	-	3,000
Personnel Committee	-	2,000
Miscellaneous		
Other	476	611
CMRC - project overhead	500	1,028
	268,968	297,730
Expenses		
Administration	200,122	205,153
Governance		
Kagike Danikobidan committee	6,458	7,210
Governing council	9,880	7,600
Personnel committee	-	2,000
Quality assurance committee	1,244	4,723
Perinatal review committee	2,891	2,594
Standards committee	2,318	2,187
Board of assessors committee	1,211	1,355
Education committee	1,994	3,396
Public representative selection committee	1,000	1,545
Complaints committee	1,211	5,804
Accreditation, Approval and Standards Review (Note 4)	1,250	-
Complaints and Investigation (Note 5)	3,802	1,000
Umbrella Health Legislation (Note 7)	1,500	-
Amortization	2,900	3,416
Canadian Midwifery Registration Exam (CMRE)	1,450	1,000
CMM & MMBP website development	-	44,997
IEHP - 2012	19,122	-
Registration Software (Note 8)	2,500	-
Move to Vacant Office (Note 9)	3,000	-
Strategic Planning (Note 10)	1,500	-
QA random practice audit	2,625	3,480
	267,978	297,460
Excess of revenue for the year	\$ 990	\$ 270

The accompanying notes are an integral part of these financial statements.

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COLLEGE OF MIDWIVES OF MANITOBA
Statement of Cash Flows

For the year ended March 31	2013	2012
Cash Flows from Operating Activities		
Excess of revenue for the year	\$ 990	\$ 270
Adjustments for		
Amortization	2,900	3,416
	<u>3,890</u>	<u>3,686</u>
Changes in non-cash working capital balances		
Accounts receivable	8,055	(27,570)
Prepaid expenses	336	(324)
Accounts payable and accrued liabilities	(38,873)	35,395
Deferred contributions	14,750	(10,279)
	<u>(11,842)</u>	<u>908</u>
Cash Flows from Investing Activities		
Purchase of capital assets	<u>(679)</u>	<u>(1,564)</u>
Net decrease in cash and cash equivalents during the year	(12,521)	(656)
Cash and cash equivalents, beginning of year	<u>112,615</u>	<u>113,271</u>
Cash and cash equivalents, end of year	\$ 100,094	\$ 112,615

The accompanying notes are an integral part of these financial statements.

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COLLEGE OF MIDWIVES OF MANITOBA

Notes to Financial Statements

For the year ended March 31, 2013

1. Nature of the Organization and Summary of Significant Accounting Policies

a. Nature of the Organization

The College of Midwives of Manitoba (CMM) is the regulatory body for the profession of midwifery in the province of Manitoba, Canada. It was established on June 28, 1997 when the provincial legislature gave Royal Assent to the Midwifery and Consequential Amendments Act. The CMM is a non-profit organization and is therefore exempted from income taxes.

b. Basis of Accounting

The financial statements have been prepared using Canadian accounting standards for not-for-profit organizations.

c. Revenue Recognition

The organization follows the deferral method of accounting for contributions which includes donations and government grants. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

d. Capital Assets

Capital assets are stated at cost less accumulated amortization. Amortization based on the estimated useful life of the asset is calculated as follows:

Furniture and fixtures	5 years straight-line basis
Computers	5 years straight-line basis
Equipment	10 years straight-line basis

e. Use of Estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenditures during the reporting period. Actual results could differ from management's best estimates as additional information becomes available in the future.

COLLEGE OF MIDWIVES OF MANITOBA Notes to Financial Statements

For the year ended March 31, 2013

1. Nature of the Organization and Summary of Significant Accounting Policies (continued)

f. Financial Instruments

Financial instruments are recorded at fair value when acquired or issued. In subsequent periods, financial assets with actively traded markets are reported at fair value, with any unrealized gains and losses reported in income. All other financial instruments are reported at cost or amortized cost less impairment, if applicable. Financial assets are tested for impairment when changes in circumstances indicate the asset could be impaired. Transaction costs are the acquisition, sale or issue of financial instruments are expensed for those items remeasured at fair value at each statement of financial position date and charged to the financial instrument for those measured at amortized cost.

2. First Time Adoption

Effective April 1, 2012, the organization adopted the requirements of the new accounting framework, Canadian Accounting Standards for Not-for-Profit Organizations (ASNPO) or Part III of the requirements of the Canadian Institute of Chartered Accountants (CICA) Handbook - Accounting. These are the Foundation's first financial statements prepared in accordance with this framework and the transitional provisions of Section 1501, First-time Adoption have been applied. Section 1501 requires retrospective application of the accounting standards with certain elective exemptions and retrospective exceptions. The accounting policies set out in Note 1 - Summary of Significant Accounting Policies have been applied in preparing the financial statements for the year ended March 31, 2013, the comparative information presented in these financial statements for the year ended March 31, 2012 and the preparation of an opening ASNPO statement of financial position at the date of transition of April 1, 2011.

No exemptions were used at the date of transition to Canadian accounting standards for not-profit-organization.

The organization issued financial statements for the year ended March 31, 2012 using Canadian generally accepted accounting principles prescribed by the CICA Handbook - Accounting Part V - Pre-changeover Accounting Standards. The adoption of ASNPO resulted in no adjustments to the previously reported assets, liabilities, net assets, excess of revenue over expenditures and cash flows of the organization.

COLLEGE OF MIDWIVES OF MANITOBA
Notes to Financial Statements

For the year ended March 31, 2013

3. Capital Assets

	2013			2012		
	Cost	Accumulated Amortization	Net Book Value	Cost	Accumulated Amortization	Net Book Value
Equipment	\$ 1,838	\$ 919	\$ 919	\$ 1,838	\$ 735	\$ 1,103
Furniture & fixtures	10,228	10,117	111	10,228	10,005	223
Computers	39,997	37,817	2,180	39,316	35,211	4,105
	\$ 52,063	\$ 48,853	\$ 3,210	\$ 51,382	\$ 45,951	\$ 5,431

4. Deferred Contributions - Accreditation, Approval and Standards Review

These deferred contributions represent internally restricted funding for the required accreditation process, approval of education and bridging programs, and ongoing review of current standards of practice in Manitoba.

	2013	2012
Balance, beginning of year	\$ 5,535	\$ 12,997
Amount recognized to offset expenses-program approval	-	(7,462)
Transfer from operations	1,250	-
Balance, end of year	\$ 6,785	\$ 5,535

5. Deferred Contributions - Complaints and Investigation

These deferred contributions represent restricted funding received from Manitoba Health for future complaints and investigation and interest earned on investments held.

	2013	2012
Balance, beginning of year	\$ 91,665	\$ 89,482
Interest earned on investments	1,198	1,183
Transfer from operations	3,802	1,000
Balance, end of year	\$ 96,665	\$ 91,665

COLLEGE OF MIDWIVES OF MANITOBA
Notes to Financial Statements

For the year ended March 31, 2013

6. Deferred Contributions - Public Education

These deferred contributions represent restricted funding for public education initiatives to advise the public of the role of the college of Midwives of Manitoba.

	2013	2012
Balance, beginning of year	\$ 500	\$ 500
Transfer from operations	-	-
Balance, end of year	\$ 500	\$ 500

7. Deferred Contributions - Umbrella Health Legislation

These deferred contributions represent internally restricted funding for activities related to migration to the Regulated Health Professions Act as required by the Health Professions Regulatory Reform Initiative.

	2013	2012
Balance, beginning of year	\$ 3,100	\$ 3,100
Transfer from operations	1,500	-
Balance, end of year	\$ 4,600	\$ 3,100

8. Deferred Contributions - Registration Software

These deferred contributions represent internally restricted funding for the future purchase of a regulatory registration software package which will automate and streamline many of the member registration and registration renewal functions, including invoicing, receipting, emailing and producing reports.

	2013	2012
Balance, beginning of year	\$ -	\$ -
Transfer from operations	2,500	-
Balance, end of year	\$ 2,500	\$ -

COLLEGE OF MIDWIVES OF MANITOBA
Notes to Financial Statements

For the year ended March 31, 2013

9. Deferred Contributions - Move to Vacant Office

These deferred contributions represent internally restricted funding for potentially moving into a larger office suite and the related relocation costs associated with telephone, computer and alarm monitoring.

	2013	2012
Balance, beginning of year	\$ -	\$ -
Transfer from operations	3,000	-
Balance, end of year	\$ 3,000	\$ -

10. Deferred Contributions - Strategic Planning

These deferred contributions represent internally restricted funding for the costs associated with a strategic planning event, which is expected to occur in 2014.

	2013	2012
Balance, beginning of year	\$ -	\$ -
Transfer from operations	1,500	-
Balance, end of year	\$ 1,500	\$ -

11. Pension Plans

During the year, the organization contributed \$9,242 (\$8,729 in 2012) on behalf of its employees.

Eligible employees of the organization are members of the Healthcare Employees Pension Plan (a successor to the Manitoba Health Organization Inc. Plan) (the "Plan") that is a multi-employer defined benefit pension plan. Plan members will receive benefits based on the length of service and on the average of annualized earnings during the best five years of the last ten years prior to retirement, termination or death, that provides the highest earnings.

Pension assets consist of investment grade securities. Market and credit risk on these securities are managed by the Plan by placing plan assets in trust and through the Plan investment policy.

COLLEGE OF MIDWIVES OF MANITOBA Notes to Financial Statements

For the year ended March 31, 2013

11. Pension Plans (continued)

The most recent actuarial valuation of the plan as at December 31, 2011 indicated a solvency deficiency. The deficiency will be funded out of the current contributions in the subsequent years. Employer contribution rates were increased on January 1, 2011 to 7.8% of pensionable earnings up to the yearly maximum pensionable earnings limit ("YMPE") and 9.4% on earnings in excess of the YMPE. On April 1, 2012 employee contribution rates increased to 7.6% of pensionable earnings up to the YMPE and 9.2% on earnings in excess of the YMPE. On April 1, 2013, both employer and employee contribution rates will increase to 7.9% of pensionable earnings up to YMPE and 9.5% on earnings in excess of the YMPE.

12. Financial Risk Management

The organization, through its financial assets and liabilities, is exposed to various types of risk in the normal course of operations. The organization's objective in risk management is to optimize the risk return trade-off, within set limits, by applying integrated risk management and control strategies, policies and procedures throughout the organization's activities. The following analysis provides a measurement of those risks at year end.

Credit Risk

Credit risk is the risk that one party to a financial instrument fails to discharge an obligation and causes financial loss to another party. Financial instruments which potentially subject the organization to credit risk consist principally of accounts receivable, however the majority of this receivable is from the provincial government and therefore the risk is reduced.

Liquidity Risk

Liquidity risk is the risk that the organization will not be able to meet its obligations as they fall due. The organization maintains adequate levels of working capital to ensure all its obligations can be met when they fall due.

13. Lease Commitment

The organization has an operating lease for its premises at approximately \$529 per month with yearly increments to July 14, 2017.

