## **MIDWIVES' PROTECTION PROGRAM**

Coverage Overview

MABC Membership November 4, 2024





Ministry of Finance

## **Introductions**

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Grateful to live, learn and work on the unceded traditional territories of the the Lak'waŋan and W\_SÁNEĆ peoples



# **Agenda**

- MPP Background
- Services
- Coverage
- Midwives' responsibilities
- Questions



# What is MPP - History

- Risk Financing Program housed within Ministry of Finance
- Nov 2000 MABC's private insurer:
  - reduced malpractice coverage limit by 50%
  - increased premiums by nearly 800%
- Other private insurers not interested or too costly
- Midwives Protection Program established Feb 1, 2001



### What does MPP do?

### Administration / Consulting Services

- MABC administers the program in conjunction with MPP
- Interpret and explain coverage
- Risk management advice

### Claims Services

Manage claims & litigation



## **The MPP Team**

## **Advisory / Consulting Services**

Sharon White, Director, Client Services <a href="mailto:Sharon.P.White@gov.bc.ca">Sharon.P.White@gov.bc.ca</a>

General Mailbox: MPP@gov.bc.ca

### **Claims Services**

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Kash Basi: kash.basi@gov.bc.ca

General Claims Mailbox: RMBClaims@gov.bc.ca



### **How does MPP Work?**

- Actuarially valuated program of self-insurance
- Program is intended to be self-sufficient
- Funded through contributions (premiums) from MABC members with initial start-up contributions from Ministry of Health
- Premiums collected by MABC



## Who is Covered - Covered Entities

### BC Registered Midwives who are:

- 1. A member of the Midwives Association of BC
- 2. In good standing with the BC College of Nurses and Midwives
- 3. Current in their contribution/premium payments

while acting within the scope of midwifery practice as set out in the *Health Professions Act* and Midwives Regulation 281/2008, as amended from time to time.



## Who is Covered - Covered Entities

### Coverage for Midwives also includes:

- Midwives who have elected to cease the practice of Midwifery in a form approved by the MABC and MPP (e.g. retired midwives, midwives on leave, etc.)
- Present or former second attendants providing services to a Midwife under an arrangement approved by the BCCNM
- Student Midwives attending a midwifery program at an education institute approved by BCCNM, while engaged in a preceptorship under the direct supervision of a covered Midwife

# Who is Covered - Specified Entities

- Sole Proprietorship an unincorporated business that is owned by one individual
- Partnership an association or relationship between two or more Midwives who join together to carry on a business in common with a view to profit in providing Midwifery Services

### MABC

MPP **does not cover** corporations, including personal corporations



### What is covered?

- Professional Liability (Malpractice)
- Disciplinary Matters Assistance
- Coroner's Inquest Legal Assistance
- Criminal Defense Reimbursement



# **Professional Liability (Malpractice)**

Covers **third party claims/losses** (e.g. injury to mother or newborn) **arising from:** 

- the provision of <u>Midwife Services</u> by a <u>Midwife</u> while acting <u>within the scope of duties</u> as a midwife and customary to the practice of midwifery as set out in the <u>Health Professions Act</u> <u>Midwives Regulation</u>; and
- for <u>Specified Entities</u> (e.g. Sole Proprietorship, Partnership), Professional Services rendered in BC and directly related to the practice of Midwifery

**LIMIT:** \$20,000,000 per claim for Midwives \$5,000,000 per claim for Specified Entities

There is no annual aggregate.

# **Disciplinary Matters Assistance**

- Provides legal assistance for disciplinary matters (complaints to BCCNM of professional misconduct, incompetence or incapacity)
- Does *not* assist with privileging issues (but disciplinary matters can impact privileging decisions)

**LIMIT**: up to \$100,000 annual aggregate per Coverage Year (February 1 of each year)

# **Coroner's Inquest Legal Assistance**

- Legal assistance when a midwife is called to a coroner's inquest due to provision of midwifery services and while acting within scope
- Does not apply when midwife is acting as an expert witness in a coroner's case or as a post-mortem witness

LIMIT: \$20,000,000 per claim, no annual aggregate

### **Criminal Defense Reimbursement**

- Covers criminal allegations only while providing midwifery services
- <u>Reimbursement</u> for costs incurred for the successful defense of a criminal charge
- Reimbursement is not paid until:
  - o criminal proceedings concluded; and
  - o all appeal periods have expired; and
  - o all charges brought against the midwife were dismissed or stayed.

LIMIT: \$150,000 per action \$150,000 annual aggregate



# Midwives' responsibilities

- Cooperate and follow advice given by MPP and its external legal counsel
- Report incidents (including potential complaints) promptly, fully & honestly
  - Incident Reporting Guidelines and Form are available on MPP website
  - Once reported, Claims team will be in touch
  - If unsure whether to report, err on the side of caution (no downside or penalty for MPP reporting)
- Maintain Commercial General Liability coverage





#### Incident Reporting Guidelines

Phone: (250) 356-1794 Claims Fax: (250) 356-0661

NEONATAL

#### PREGNANCY

Ц	seizures or other significant sequelae	<ul> <li>Significant infant feeding or weight loss issues</li> <li>Complications from resuscitation (i.e.</li> </ul>	
	Antepartum hemorrhage with significant	pneumothorax)	
	sequelae	☐ Significant fetal compromise	
	Medication or prescription error	(HIE/acidosis/asphyxia)	
	Intrauterine fetal demise	<ul> <li>Neonatal seizures or other neurological signs</li> </ul>	
	Client refusing recommended care with significant concerns for client/fetal wellbeing	<ul> <li>Abnormal head imaging / EEG related to possible birth injury</li> </ul>	
		<ul> <li>Meconium aspiration syndrome</li> </ul>	
	potentially impacting fetal wellbeing	<ul> <li>NICU admission prolonged &gt;72 hours or with ongoing concerns</li> </ul>	
LABOUR/DELIVERY		☐ Significant neonatal infection (i.e. GBS, HSV)	
	Unattended birth	<ul> <li>Severe hyperbilirubinemia, kernicterus</li> </ul>	
	Unplanned homebirth with concerns or client dissatisfaction	☐ Neonatal death	
	Unexpected preterm delivery	GENERAL/PROFESSIONAL	
	Uterine rupture or dehiscence	☐ Known dissatisfied client	
	Umbilical cord accidents/complications	Complaint to College of Midwives	
	Assisted or surgical delivery with significant	Complaint to health authority or hospital	
	complications	☐ Known breach of CMBC standard	
	Significant tearing and/or episiotomy with other sequelae or dissatisfied client	<ul> <li>Any telephone or written comment referencing law suit or compensation or complaint sent to</li> </ul>	
П	Significant hemorrhage (> 1000 ml and/or transfusion)	Ombudsman, Minister etc.	
	Appars ≤ 4 at 1 min and/or ≤ 6 at 5 mins	<ul> <li>Significantly negative social media review</li> </ul>	
H	Significantly abnormal blood gases (i.e.	<ul> <li>Inter-professional dispute or criticism of care</li> </ul>	
ш.	umbilical artery pH < 7.0, base excess ≥ -12)	<ul> <li>Request for records by legal counsel</li> </ul>	
	Difficult resuscitation (i.e. prolonged positive pressure ventilation, any intubation)	Client refusing recommended care where there is concern for client / fetal / neonatal	
	Stillbirth	wellbeing	
		RM terminating care of client Family raising concerns about midwifery care	
POSTPARTUM		Any incident of concern requiring advice	
	Complicated or serious infection/septicemia	Any incident of concern requiring advice	
	Significant post C-section complication	-	
	Suturing / perineal healing concerns	NOTE: These are guidelines only, based on areas where risk of complaints or legal action is highest.	
	Maternal ICU admission		
	Maternal death		
	Thromboembolism (DVT, PE)	Should you have any other concerns or an incident occurs in an area not listed here you are advised to contact the MPP for advice. Prompt reporting is a requirement of MPP coverage.	
	Disseminated Intravascular Coagulation		
	Difficulty following-up at-risk infant / client		

Sources: Health Care Protection Program and Midwives Protection Program claims history, 2001 MPP Incident Reporting Guidelines, Society of Obstetricians and Gynaecologists of Canada guidelines, Health Care Insurance Reciprocal of Canada (HIROC), and Canadian jurisprudence.

Significant post-operative wound infection

# Incident Reporting Guidelines & Incident Reporting Form:

https://www.bcmpp.org/sites/default/files/documents/Pub\_MPP\_IncidentRptingGuidelinesFRM\_fillable\_2021-01-13.pdf

### **Claims Email:**

RMBClaims@gov.bc.ca

### **Phone:**

(250) 356-1794



# What MPP does not Cover

- Loss or damage to property
- Injury to the midwife
- Loss of income/business concerns
- Occupier's or general liability losses / claims (e.g. slip & fall)
- Expert witness activity
- Privileging issues
- Injunctive or defamatory relief against clients
- Legal advice outside the context of a claim



# bms.

# MABC Insurance Solutions

Protection for You and Your

Practice



November 2024

# About BMS



700,000+

Healthcare & Regulated Professionals



60+ Years

Combined Industry Experience



**Dedicated** 

Claims Advocacy & Support



**Specialist** 

Team of Knowledgeable Brokers



Tens of Thousands

Businesses Throughout Canada & Globally



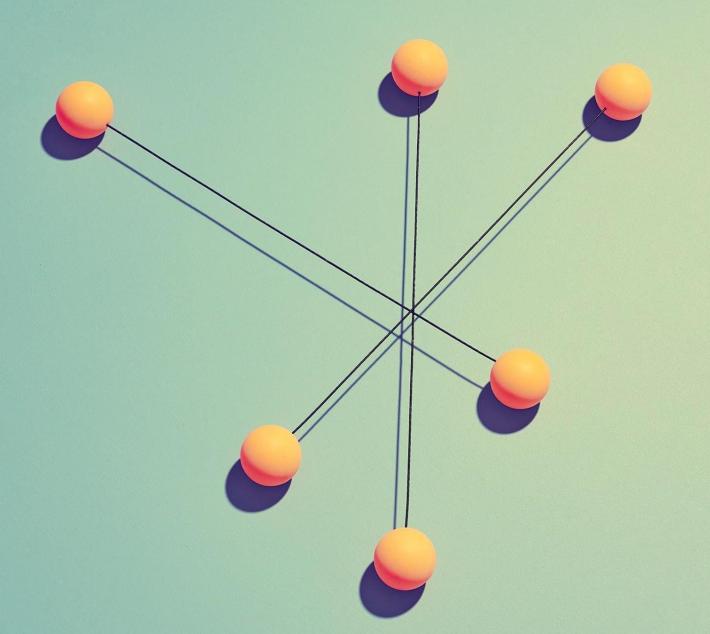
Strategic Risk

Management & Consultation





# Key Points





What is CGL?



How Insurance Responds



Coverage Highlights



Other Coverage



### An insurance policy that:

- ✓ Covers claims related to bodily injury, property damage, and personal & advertising injury;
- ✓ Protects the insured/the insured business from financial losses due to claims by third parties (customers, clients, or other businesses) for incidents that happen on the business's premises or as a result of its operations.

# Commercial General Liability

### 3rd Party Property Damage Claim Example:

A midwife was assisting with a home birth when a portable birthing pool that had been set up in the client's living room, malfunctioned and began leaking. The water flooded the surrounding area, damaging hardwood floors, furniture, and an adjacent carpeted room. The homeowners sued the midwife, alleging that she was responsible for overseeing the equipment setup and should have taken measures to prevent or control the leak.

#### Outcome:

The court found the midwife partially liable and ordered her to pay \$15,000 in damages.

# Commercial General Liability

### 3rd Party Bodily Injury Claim Example:

A family member suffered an injury while attending a home birth. During the birth, the midwife placed a portable heater nearby to keep the newborn warm, but the heater was placed in a high-traffic area. A family member tripped over it and sustained a severe ankle fracture that required surgery and extensive rehabilitation. The family member sued the midwife and her practice, claiming negligence for not ensuring the safety of others present during the birth.

#### Outcome:

The court found the midwife and her practice partially liable for the injury. The practice was ordered to pay \$25,000 in damages.



# Key Elements of CGL insurance



### Bodily Injury & Property Damage Liability (2M, 3M, or 5M)

Covers the costs if the insured/insured business is found liable for causing physical harm to someone or damaging their property.

### Personal & Advertising Injury Liability (2M, 3M, or 5M)

For claims related to defamation, copyright infringement, and other offenses that may arise from advertising practices or interactions.

### **Products - Completed Operations Liability** (2M, 3M, or 5M)

If a business manufactures or sells products, this aspect of a CGL policy can cover claims of injury or damage caused by the product after it has left the business premises.

### Medical Payments (50,000)

The policy will pay for immediate medical care regardless of fault, up to a specified limit

# CGL Options for MABC Members

Individual CGL

**Business CGL** 

### Clinic Package

For Midwives with valuable property/contents to insure.

Includes CGL, plus:

- √ \$50,000+ Contents
- ✓ Business Interruption
- √ \$50,000+ Equipment
  Breakdown
- √ \$10,000 Crime





# Clinic Package

# Property/Business Interruption Claim Example:

A fire broke out in an adjacent unit of the building where the practice was located, causing smoke and water damage to the midwifery clinic itself. While the clinic did not sustain direct fire damage, smoke infiltration and water from firefighting efforts affected furniture, medical equipment, computers, and important client records. The business had to close temporarily for repairs and cleaning, resulting in a loss of income.

#### Outcome:

The insurance company paid \$95,000 to cover the losses and get the clinic back to normal operations.



Consider your Circumstances...

Do you:

Deliver midwife services at one practice only?

 Deliver midwife services at more than one practice?

- Operate a midwife practice as a:
  - Sole Proprietorship;
  - Partnership; or
  - Corporation?

 Have valuable contents, stock, and/or professional equipment?



# Do you....

Deliver services at one practice only or at multiple practices?

Check to see if you are an employee of the practice(s).

To meet the insurer's definition of employee, the midwife must be:

- working for the practice,
- > paid by the practice,
- be working under the direction and control of the practice, and
- > not be a volunteer or independent contractor.

If you are an employee, then you are automatically insured under the practice's CGL policy.



# Do you...

Operate a SOLE PROPRIETORSHIP?

#### Individual CGL

Cannot add other midwives to your policy

OR

#### **Business CGL**

Can add other midwives as Additional Insured Midwives (for non-employees and/or midwives who do not have their own CGL)

OR

#### Clinic Package

Can add other midwives as Additional Insured Midwives (for non-employees and/or midwives who do not have their own CGL)







# **Tailored Insurance Solutions**

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