



# CORPUS CHRISTI BIRTH CENTER

## Apprenticeship Policy Manual

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# Apprenticeship Policies

## Student Classifications

Students are classified two ways at Corpus Christi Birth Center (CCBC): by length of stay and by their experience and skill level (*as determined by CCBC*).

### 1. Length of Stay:

- a. **Temporary:** Students will be considered “temporary” if they are not committed to completing their apprenticeship through the Corpus Christi Birth Center.
- b. **Full-time:** A “full-time” student is one who has made a long-term commitment of a year or more. Most students in this category will also plan to finish their training with CCBC.

### 2. Classification of Experience:

- a. **Observing Students:** Observing students are those who may observe clinical days and labors without direct participation. All new students will begin in this way, even if they have prior experience. Preceptors will determine when the student is ready to do more than observe.
- b. **Actively Participating Students:** Before a student may actively participate in a patient’s care, she must have completed enough observation and education to begin participation. The level of participation will be determined by the preceptor who is overseeing the care being provided at the time. Students must practice and demonstrate most skills prior to doing them for a patient. However, some skills may be learned (with patient permission) under the direct supervision of the preceptor.
- c. **Primary Birth Assisting Student:** When a student has demonstrated the basic skills necessary to serve as a primary birth assistant, a preceptor may choose to let her function in this role. Primary Birth Assistant is not the same as acting as primary under supervision. The preceptor is the primary attendant, but the student may assist her in a more active role as she advances her skills enough so that she may eventually move on to the final role which is Student Acting as Primary Under Supervision.
- d. **Student Acting as Primary Under Supervision:** A student may begin acting as a Primary Under Supervision only after the Clinical Director has

approved her skills and knowledge to begin. She must have also studied and worked as an apprentice for a minimum of 18 months prior to becoming a Primary Under Supervision. Before a student begins acting as Primary Under Supervision, she must be taught and participate in the skill of “catching” babies with a preceptor. “Catching babies” is not the same being “Primary Under Supervision”. Being “Primary” means thinking like a midwife! Once a student becomes ready for the responsibility to act as Primary Under Supervision, the preceptors will let the student know. Please note that no student will always act as Primary Under Supervision at every birth after reaching this stage. She will still be expected to continue to work the various roles at a birth as she is assigned to do so.

## Requirements for Those Interested in Apprenticeship:

These are the requirements for students who wish for us to consider offering an apprenticeship position at CCBC.

1. All apprentices must begin by filling out an *Apprenticeship Inquiry Form (AIF)* if they wish to be considered as a candidate for apprenticeship. **Filling out an Inquiry Form will not considered as a commitment by the student nor is it a guarantee of acceptance into an apprenticeship with CCBC.**
2. Along with the AIF, we ask students to provide at least two personal references and one midwife reference (*if possible*) or a work-related reference if a midwife reference is not available. If the student has been involved in a previous apprenticeship, she must also provide the names and contact information for each of her former preceptors.
3. After we read over a student’s inquiry form, if CCBC offers an apprenticeship at CCBC there will be a mandatory trial period before a long-term commitment will be offered. With the offer, the student will be asked to sign an agreement with CCBC. The student will not be considered as one of our apprentices prior to a written agreement, signed by both parties.
4. All apprentices must enroll in a midwifery training program that meets with the Birth Center’s approval. Please talk to us about which course you are considering if you have any questions. All students are expected to become familiar with NARM’s requirements as well and keep up to date with the most current NARM standards. [www.narm.org](http://www.narm.org)

## Work Exchange Program:

Many birth centers and midwives charge for the clinical education and experience they provide. At CCBC, we prefer to use the work exchange model because we believe it fits better with an apprenticeship model of education. One of the most obvious benefits of a work exchange program is the substantial savings on the potential cost to students. CCBC also benefits from this exchange by having extra help with birth center related duties.

A midwife's work includes a wide variety of responsibilities: everything from cleaning up toilets and vomit to dealing with people and paperwork. Midwives don't just "do prenatals" and "catch babies." We believe that a balanced midwifery program will develop a good work ethic for the student all areas. A good student, just like a good midwife, should have the heart of a servant.

Work exchange programs benefit both the student and the birth center. It takes a lot of work to run a busy midwifery practice and birth center. We appreciate the valuable help our students provide. And we believe we are also providing our students with valuable lessons in all aspects of the midwifery business.

## Mandatory Trial Period for All New Students:

The first 8 weeks at CCBC for any student, whether the student is wanting a temporary status alone or to move into full time. The first 8 weeks shall always be considered a trial period. During this trial period, either party may terminate the agreement for any reason.

At the end of the trial period, both parties shall have an opportunity to decide whether to continue the apprenticeship. **Even if everything seems to be going very well, no decision to continue the apprenticeship commitment can be considered final unless both parties have clearly communicated their intentions after an 8-week trial period has been completed.**

During the trial period, there are several things to keep in mind:

1. Attendance at every prenatal and birth cannot necessarily be guaranteed.
2. A new apprentice (or new with us) will observe first. Please do not expect hands-on experience for in the beginning. When your preceptor is ready and she believes the time is right, she will look for opportunities to teach and provide her student with hands-on experience.

3. Throughout the trial period, preceptors and staff will be evaluating your attitude, any knowledge you might have, your attentiveness, and eagerness to learn respectfully. You will also be evaluated for how you interact with all staff and especially our patients. We will observe how our patients respond to you. We are looking for someone who knows how to show respect and interact with others without needing to dominate a conversation. During this time, one of three things could happen:
  - a. You may decide that we are not a good match for your apprenticeship needs. Or you may decide that midwifery is not what you expected, and you choose to not continue in that path. We would hope that if you choose not to continue with us for whatever reason, that you will be able to look back on your time with us as a positive experience. We recognize that not everything in life works out exactly as planned. But we hope that even when that happens that it can still be a positive experience. The beauty of a “trial period” is that neither party has to make premature a long-term commitment and it doesn’t work out; we can both walk away without hard feelings.
  - b. It is also possible that we might decide that you are not a good fit for our practice long term. If this happens, is not necessarily because we think that you are a bad student or that we think you won’t fit into someone else’s practice. But through experience we have learned that is much better to move on than it is to try and make things work when the fit isn’t right.
  - c. During this time, we could also both find that we are a great fit and want to continue the apprenticeship. If we are a “good fit” for each other, we will really want you to stay on as a full-time apprentice if that is possible. We have had several “good fit” apprentices that could only do part time or temporary stays with us. That’s okay, too. We will work to figure out what works best for both of us if we get to that point.

## Transportation, Computer and Cell Phone Requirements:

All full-time apprentices must provide their own reliable transportation. Temporary students are also expected to have their own transportation if possible, but exceptions are sometimes granted depending on the circumstances.

1. All apprentices must have their own means of financial support for basic living expenses and educational needs while staying with us. Consider the cost of course work, books, supplies, rent, groceries, gas, entertainment, etc. *(No exceptions.)*
2. All apprentices must have a reliable cell phone. *(No exceptions.)*
3. All apprentices must have a reliable lap top computer. It is necessary for charting needs in our practice. *(No exceptions.)*

## Living Arrangements:

CCBC can provide housing for up to two at a time. See details about this option under “Student Housing Details.” (Please ask. This option is not available at the time of this revision because housing is occupied.)

### The advantages to using student housing are:

1. Low cost. A comparable efficiency apartment in the area would cost about \$800 a month. And renting a room in the Corpus area runs around \$400 a month.
2. Proximity to the Birth Center.
3. Time to get to know other students and share common interests and goals or study.

**Student Housing Details** (Please ask. This option is not available at the time of this revision because housing is occupied.)

1. Monthly rent: \$200 per person *(all bills paid)*.
2. 2 rooms and a full bath. (one room is a bedroom that is shared, the other a living room or common area which includes a kitchenette)
3. Furnished: linens, table and chairs, chest-of-drawers, two single beds with shelves and closet space for personal items.
4. We allow only limited cooking because the apartment is very small. We provide a safe conductive heat burner with special pans, a microwave, crock pot, small refrigerator and coffee pot.
5. Parking: Parking is limited. Students must park at the curb and leave the driveway free for the owners of the home. The owners of the home and birth

center will not be responsible for vehicles parked on the street. Tenants must obey city laws and park the correct direction and must assume liability for their own property including vehicles.

6. Laundry Facilities: Tenants may wash personal laundry at the birth center as long they clean up after themselves and do not interfere with birth center business in any way. Please keep all personal items and supplies marked clearly away from birth center supplies to avoid confusion.
7. Tenants must keep the rental property clean and will be held responsible for any damage they cause during their stay whether it is by accident or neglect. (This does not include normal wear and tear.)

Providing your own housing is also an option if it doesn't interfere with other obligations.

## Access to Patient Care (our digital charts):

During your apprenticeship with us, you will also need access to our digital charts. We use Patient Care for charts, and they charge us per user. So, we require our students to cover the cost of their access. Currently, that cost is **\$20 per month**. You will be required to cover this expense.

## Necessary Supplies and Equipment for Apprentices:

*The following supplies or equipment are required within the first couple of weeks of your apprenticeship:*

- ◆ A dependable waterproof watch with the ability to count seconds.
- ◆ Stethoscope. (This does not need to be an expensive one, but you will need to use your own stethoscope, so you can begin taking blood pressure using your own stethoscope.)
- ◆ Blood pressure cuff
- ◆ A cell phone & portable computer (laptop or notebook) (*must have*)
- ◆ Reliable transportation
- ◆ Appropriate clothing as described below.
- ◆ A box of non-sterile latex gloves in your own size to keep with you when on call. (We usually supply gloves, but you need to have your own supplies available, just

in case supplies we have are not available or don't fit. You will need gloves when handling laundry to prevent contact with body fluids.)

*The following supplies or equipment should be added to your birth kit within the first year of your apprenticeship:*

- ◆ All the above
- ◆ Basic emergency birth kit which should include at least the following items:
  - Your own sterile set of instruments (or “vag pack”)
  - Thermometer
  - At least two pair of non-latex sterile gloves (your size)
  - At least two singles of non-latex sterile gloves (your size)
  - 4x4 gauze (8 to 10 sterile packages)
  - A large bulb syringe (included in “vag pack”)
  - Cord clamps or cord tape
  - A soft baby blanket(s) or towel(s) for baby
  - Baby hat(s)
  - Angelica Tincture, Shepard's Purse Herbal Tincture or other Tincture Formula for controlling postpartum bleeding

The following supplies or equipment are required before you are allowed to serve as Primary Under Supervision:

- ◆ All the above
- ◆ A baby scale (or fish scale with oz increments) and net bag or blanket for weighing
- ◆ O2 tank and proper resuscitation equipment for both mother and baby
- ◆ A DeLee
- ◆ Additional herbs and homeopathic remedies
- ◆ A Doppler

## Legal Stuff:

Students will be expected to keep up to date on all Texas laws pertaining to midwifery students while in Texas.

1. At no time should a student refer to herself as a “Midwife.” This is against the law. A student may call herself “student midwife” or “apprentice midwife” or if she is acting as a primary midwife under supervision, she may call herself as a “Senior Student”.

If at any time a student willfully misrepresents herself to anyone, it will be considered grounds for immediate termination of the apprenticeship. This includes misrepresenting her level of experience or education as a student-midwife.

2. At no time should the student advertise midwifery services or accept payment of any kind for midwifery related services directly from any patient. This is also against the law.
3. Students must know and adhere to HIPPA standards at all times when it comes to patient privacy (including after the apprenticeship has ended.) This is not only our standard; it is the law. Be particularly aware of HIPPA laws when interacting online such as on Facebook or Twitter, etc.

## Policies Related to Prenatal Days and Workdays:

We require all apprentices to work at the birth center or prenatal office on prenatal days. Students may also be required to work an additional workday (up to one per week). Be there.

1. Most often clinic days and workdays will be scheduled between 8:30 AM and 6:00 PM, with time off for lunch. *(You will be responsible for your own lunch, but we usually schedule an hour and a half off for lunch.)*
2. We currently schedule all patient office visits on Wednesdays and Thursdays with Tuesday and Friday as overflow days. *(Obviously the timing of births may interrupt or change this schedule.)*
3. **Students are required to wear Birth Center scrubs on prenatal days and births. We sometimes wear scrubs to public functions to promote the Birth Center. Students must wear student colored scrubs (maroon).** Sometimes a more formal attire is appropriate, such as when we attend the annual Pregnancy Center Banquet. When representing the Birth Center, we require your clothing

to be clean and not worn or wrinkled (including scrubs). Please avoid extreme fashion styles and always dress modestly. If in doubt, just ask us. Business casual or birth center t-shirts (when available) with slacks or blue jeans that are not worn looking are also allowed when not wearing scrubs.

4. We expect you to participate in all tasks scheduled on Prenatal and Workdays. This may include some rather mundane tasks (*such as cleaning the office, doing laundry, or running errands*). Even so, this is the only compensation we ask for giving you clinical experience, so we expect your full cooperation. If time permits, you may also practice midwifery skills or study your lessons in between scheduled office appointments.
5. Not every student may attend every prenatal. Some patients are okay with everyone in the room. Some are not. If we have more than one student, we may choose to alter who gets to attend. Follow the midwife's lead or ask if you don't know. When you are asked to sit out during a prenatal, make yourself useful in other ways.
6. Students are expected to participate in classes held for our patients (Labor Prep Classes, etc.). At some point, you will be expected to help teach a Labor Prep class and possibly other classes once you are ready.

## Policies Regarding Speaking with Patients:

1. Never contact any of the patients outside of the office, without your preceptor's knowledge and consent. If you are caring for a patient under a midwife's supervision, every aspect of the patient's care must be "supervised," and this includes letting your midwife know about any communication you have with the patient when the preceptor is not directly involved.
2. **As already mentioned, do not violate HIPPA laws concerning patient information!** If you are unclear about these regulations, please ask us.
3. During visits, some polite conversation is acceptable, even desirable, but please avoid talking too much or focusing too much on your own stories. The midwife will try to let her patients determine the topic of conversation as much as possible. Please remember the primary reason for the patient's visit is her maternity care.
4. Regarding giving advice or discussing pregnancy and birth related topics:

- a. Especially if you are a student in the trial period or a new student, be VERY slow to give any advice unless asked to do so by your preceptor. If the patient asks you something, keep your answers brief and polite. If she asks your advice or opinion on something pregnancy or birth related, you will direct her to the midwife, and she will either let you answer, or she will answer the patient's question. As one of my preceptors once told me, "In the beginning, you should be like a fly on the wall."
- b. As time progresses and your preceptor allows, you may give advice or counsel patients in those areas in which you have demonstrated your ability. But only speak about what you really know and **never** fake an answer to a patient. Always be willing to ask your preceptor for an answer if you do not know it.
- c. Follow your preceptor's lead during a visit. She may not ask you to participate in every visit to the same degree.
- d. At some point in time, you will be asked to do a prenatal visit on your own while the midwife supervises and observes. If you miss something, she will help you. If you don't know something, just turn to the midwife and ask for help. It is just another opportunity to learn. That is what an apprenticeship is all about. However, faking something when you don't know it, is dangerous. *(Example: It is always better to admit you can't get a blood pressure reading than it is to fake one!)*
- e. You are encouraged to ask questions. You are here to learn. When you remember that your needs are second to the patient's needs, your questions will be welcome and answered if it is possible to answer without taking away from the patient's needs at the time.
- f. If you ever disagree with the midwife or question something she has said or done, you must always speak to her about it privately. You are not expected to agree with everything your preceptor might believe. But you are expected to respect, listen and learn from her and you should never contradict her in front of or to a patient. If your disagreement with her becomes disrespectful or a stumbling block to learning, you may be asked to find another preceptor. Remember not all midwives, not all doctors, not all experts agree on many issues. So, it is understandable that at some point you might develop a differing opinion about something you are studying. But your preceptor is still your preceptor with many more years of experience than you. So, if you want to maintain a healthy

relationship with her, you must keep this in mind and show her the respect she deserves.

## Policies Regarding Student Reports, Records and Evaluations

1. All student records that need a preceptor to initial or sign or fill out, must be presented to the preceptor within a reasonable amount of time and the preceptor should not be expected to sign off on something that she cannot reasonably remember because of time that has passed.
  - a. Please do not expect a midwife to sign papers without time to review them. Therefore, choose a time when she will have adequate time to look them over (*such as at the end of a prenatal day or during a workday*). Or tell her a day or two before that you want to go over paperwork the next time you have a chance.
  - b. Do not expect your preceptor to sign something if she cannot remember what you have done. Therefore, it is important to get things signed in a reasonable amount of time and not wait too long. Even if you have to ask her later to sign a more official record documenting the same event, it is better to have her initial a temporary record within a day or two of the event. This way, if there will not be any doubt by anyone when the final record is signed.
  - c. If you are allowed to care for a patient as “primary under supervision”, the midwife still must approve of your work and learning experience before signing off or giving you credit as the primary. Even if the patient is offered a discount for your privilege to serve this patient, it is still only an opportunity for you to earn the credit, not a guarantee you will get the credit. You will be evaluated for how well you handle the responsibilities you are given. This is not to say that you will be expected to know everything. After all, it is a learning experience. But it is to say that you will be evaluated and expected to show signs that you are progressing and learning to think on your own and make wise decisions. So, if your preceptor does not think you showed the right level of responsibility and performance, you won't be given credit for doing primary care. You may still receive credit for participating in the birth but not for being primary

unless the preceptor is convinced you earned the credit for acting as primary.

- d. Credit for births will not be given until after you have reviewed the birth with your preceptor and debriefed about what you learned during the birth. Every birth should be discussed for learning purposes. It isn't always easy to do this immediately afterwards, but don't let too much time pass. The rule of thumb is to debrief within the first 72 hours after the birth! Take the initiative and ask questions. Your preceptor might start the process but don't wait for her to do so. It is primarily your responsibility to ask questions and discuss your experience.
- e. The preceptor **always** has the final say in whether she will sign off on a skill or participation. Remember, your preceptor wants you to succeed but she also does not want to sign off on something prematurely. So, if you do not believe you are getting credit where credit is due, discuss your concerns with her promptly so that any misunderstandings between you might be resolved quickly.

## 2. Evaluations:

- a. Private midwifery programs or colleges may require evaluation reports of both student and preceptor. If your program does not require such an evaluation, let us know and CCBC will provide evaluation forms.
- b. Please be respectful about your preceptor's busy schedule when asking her to fill out an evaluation. Do not wait until the last minute before your deadline. Remember the saying "Poor planning on your part, does not constitute an emergency on my part." Give your preceptor(s) time so she can give you a proper evaluation.
- c. Please make sure CCBC has a copy of any evaluations for our files. These evaluations will be kept confidential.

## Policies Regarding Being on Call and Attending Births:

Apprentices at CCBC will be given an on-call schedule. Every effort will be made to give student weekly time off duty. We also recognize that you may need time off occasionally to attend workshops or training that might make you unavailable for attending clinic days or births. We ask that you give us as much advance notice as

possible when you cannot be available on days you would otherwise be scheduled to attend.

When you are not off duty, you are expected to be available 24 hours a day. We must be able to reach you by cell phone during the time you are on-call. This means you need to keep your phone on and make sure it is within working range of your service. If you have a service problem, we want you to let one of the preceptors know and if possible, give them an alternative number to call while you are out-of-range.

If you are on-call, do not go more than 30 minutes from the birth center without discussing it with your preceptor. We allow students to be on-call while further distances away, but we still need to know your plans, especially if you are expected to serve as a primary under supervision or primary birth assistant.

Keep in mind the time it takes you to dress for a birth or get gas for your car. It is a good practice to keep your gas tank at least half full at all times and a spare set of scrubs in your car if you know you might not have time to go home first.

Do not rely on others for transportation to a birth. You must always be prepared to get there on your own. Any time you ride with another person, you could get “stuck.” More importantly, the midwife needs to leave or, if there is a transport, you may need your own transportation. So, you should always be prepared to get to a birth with your own transportation. It is just as important to have transportation to leave in an emergency. So, getting “dropped off” anywhere by someone else is never a good idea if you are on call.

When on call for a home birth, keep directions or a map to the patient’s house with you always. Do not rely on asking directions over the phone. Do not rely on GPS alone. It’s always best to have directions in mind or a map available in case GPS isn’t working.

As an apprentice, you may be asked to go up to the center first to prepare the birth room ahead of the patient and midwife arriving. After the birth, you will most likely be asked to stay and clean the birth center. This is a big part of your work exchange agreement. Expect to be at the center longer than everyone else.

Always bring with you any midwifery equipment you have (stethoscope, doppler, birth bag, O2, etc). These things can stay in your car but it’s a good practice to have them close by in case they are needed.

Apprentices will always be supervised but if for any unforeseen reason the patient arrives before the midwife or if you arrive at a home birth before the midwife, you should be prepared to chart or write down whatever might happen. Always have your

computer as well as paper and pen with you for charting purposes even if you don't expect to chart you should be prepared for emergencies.

Additional needs for home births:

- a. Bring snack food or have a little cash available. You should always be prepared for a long birth and the possibility of needing something to eat.
- b. Bring a pillow, a change of clothes and toiletries with you. You may also want to consider having a folding chair, air mattress and blanket available for some home births. Think about these things when we do the home visit and plan.

## Policies Regarding Home Birth Patients:

1. At 36-37 weeks, a home visit will be scheduled with the patient. Apprentices are expected to attend home visits, if they expect to be on call for that patient's birth.
  - a. Home visits are usually scheduled on a day other than our usual prenatal days.
  - b. It's difficult to predict how long a home visit will take. But most of our home birth patients live within 45 minutes of Corpus Christi.
  - c. You may or may not be expected to provide your own transportation to the home visit. Ask your preceptor.
  - d. Sometimes we go out to eat on home visit days. It's always a good idea to bring along some "lunch money" just in case we do this.
2. Some patients (*home or birth center*) may receive as many as two postpartum home visits: one on day two and another on day five. You will be asked to attend at least one of these postpartum home visits if you attended the home birth. The policies for postpartum home visits are the same as the 36-37-week home visit.

## Primary Patients under Supervision:

When your preceptor is convinced you are ready, she will allow you to have the experience of serving as a "primary under supervision." When you have advanced to this level, she will let you know and might ask you to serve as primary for one or more of our patients.

Go to [NARM.org](http://NARM.org) for more information about what it means to do primary care under supervision. NARM also requires a certain number of these patients be "continuity of

care patients” meaning the student has acted as primary for more than just the birth. Details are on the NARM website. Currently, NARM requires students to have a minimum of three “continuity of care” patients.

At CCBC, we assign primary patients to students only when we believe they are ready. Even when a patient allows an apprentice the privilege to act as her primary care provider under supervision, the midwife is still the one responsible and liable for her care. The student must always be supervised. The patient or the midwife has the right to revoke a student’s role in care at any time for any reason.

We believe part of a student’s training should include learning how to reach out and encourage women to choose midwifery care. So, we expect all students to promote the birth center. We want to see you making every effort to encourage women to choose the birth center during your stay with us especially by the time you reach the stage of doing primary care under supervision. At this point, you should be thinking like a midwife which includes promoting the business of midwifery care.

## Friendships, Patient Privileges, Social Media and Professional Ethics

Especially with the midwifery model of care, it is natural for occasional friendships to form between midwives and patients or students and patients. But it is extremely important to maintain professional ethics and standards always when dealing with patients, even if they are your personal friends. At times, it won’t seem fair but when dealing with patients, we are required to always be professional first and friendship will not change that fact.

This can be a difficult balance to achieve but if you work at CCBC, we insist on it. For example, the friend of a midwife or student at church may be a patient. That does not make it “ok” for the midwife or student to talk to the patient or anyone else about her pregnancy while at church. Only if the patient initiates the conversation or asks a direct question would it be appropriate to discuss her pregnancy outside of the privacy of a scheduled office visit. Another friend might be able to share with others what she knows about this person’s pregnancy, but a midwife or student midwife does not have that luxury. She must keep her mouth shut even if she is personal friends with the patient!

The same is true if you are friends with a relative or the friend of the patient. Keep your mouth shut. If you are asked health related questions (or other personal questions) by someone close to the patient, don’t answer. Explain to the person that such information

is privileged, and you are not at liberty to talk about it unless the patient specifically has instructed you to do so.

Not every patient wants to become your friend. It is possible to have an extremely friendly professional relationship without becoming personal friends. Sometimes it can be difficult to tell the difference, but it is extremely important to understand the difference. If we try to initiate a more personal relationship with a patient who doesn't really want it, we put that patient in an awkward position and violate our professional ethics.

Our standard at CCBC is that all friendships with patients must be initiated first and only by the patient. Students will not be allowed to seek out a personal relationship with any of our patients if one does not already exist. And where friendships do exist, students will be required to maintain professional and ethical standards always.

Students are to be particularly careful about this when interacting with patients on the phone, with text messages, emails, and especially in social networking. For example, a student must never initiate a request to become friends with a patient on Facebook. The student may accept an invitation but only if the patient initiates it.

If a student is friends with a patient on Facebook, she must never violate HIPPA laws pertaining to that patient's privacy. Never post a patient's picture or personal information on Facebook without that patient's permission. If in doubt, ask your preceptor or the patient FIRST or better yet, just don't do it if you have any doubts.

Rules for interacting with CCBC patients and former patients apply even after you leave an apprenticeship with CCBC. By entering into an apprenticeship agreement with CCBC you must agree to these ethical standards as they pertain to any of our patients or former patients and you must promise to keep those ethical standards even after your apprenticeship has ended.

It is also considered unethical to solicit patient business from any previous patient of a former preceptor after you become a midwife. This is seen as "biting the hand that fed you" among midwives and it won't build positive peer relationships with your sister midwives. If a former patient seeks you out without any solicitation that would be different. But even then, it might be better in the long run if you at least try to direct the patient back to her previous midwife or talk to your former preceptor about it first. Remember, you may one day be in her place spending time and energy training new midwives. So, think first how you would want to be treated after your students finish their training with you.

One final thing, to some extent what a student does on her “own time” is up to her. However what CCBC apprentices do in their free time may also reflect on the Birth Center. Please keep this in mind, especially when your activities and conduct are in a public setting, including social media such as Twitter or Facebook. We do not approve of cruel, disrespectful, or crude joking, language or behavior. Therefore, any conduct which we believe is detrimental to the reputation of the Birth Center will be considered cause for termination.

## Conflict of Interest

*When you agree to accept an apprenticeship at CC Birth Center, you are agreeing to support our Birth Center both publicly and privately and to avoid any conflicts of interest. If you have any question about what might be considered a conflict of interest by the Birth Center, please ask the Clinical Director or Administrator.*

## Appendix



# CORPUS CHRISTI BIRTH CENTER

939 Ayers Street, Corpus Christi, TX 78404  
Phone 361.883.BABY (883.2229) or FAX 361.336.0212

CCBirthCenter.com

Director and Senior Preceptor:  
Beth Overton, CPM

## Apprenticeship Inquiry Form

This form is for letting CCBC know you have an interest in a possible apprenticeship. It is not an agreement. Therefore, students are under no obligation to CCBC because they submitted this Inquiry Form. But this form is a required step in the process. We desire to find students who will most likely be a good fit for our practice. By taking the time to answer these questions, it usually saves lots of time in the long run because it helps us find the students who might fit our practice best. If we do decide that you might be a good fit for our practice, we will contact you and offer you a possible apprenticeship agreement, but you will be under no obligation until you agree to our offer.

Completed inquiries may be FAXED to 361.336.0212

Or sent by e-mail to [ccbirthcenter@gmail.com](mailto:ccbirthcenter@gmail.com) (please put "Apprenticeship Inquiry" in the subject header)

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Preferred Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Is your preferred phone a cell? \_\_\_\_\_ Can you receive text messages? \_\_\_\_\_

Marital Status \_\_\_\_\_ Children's ages \_\_\_\_\_

Please answer the following questions. Please note that the only "right" answer to the following questions is a truthful and honest one. We recognize that students may hold different opinions on

some topics or might not have formulated opinions on other topics. Your answers will help us get to know you better. Your open and honest answers will help us determine if you might be a good fit in our practice and give us an idea if you will be happy working with us. We recognize that not everyone will be a good fit with us and that's okay too. We still wish you the best in finding a preceptor who fits you better. We also are not necessarily looking for a "perfect match" nor do we expect you to agree with us 100% on every topic. But we do know from experience that students who fit better, will be more likely to be happy, and have a more positive learning and work experience while with us.

Please copy the questions and number them when you answer. You will need to create a new document to answer because there is not enough space under each question to answer on this form.

Please include a recent photo of yourself and at least two personal references along with the completed inquiry form. If you have ever worked with or shadowed another midwife (midwives), please include her name(s) and contact information.

1. Why do you want to become a midwife?
2. Why do you want to be an apprentice at the Corpus Christi Birth Center?
3. What is your educational background?
4. Are you currently enrolled in an academic program? Do you plan to enroll in an academic program? Which one? If not, what are your plans?
5. Have you had any experience working with pregnant or birthing women, i.e. childbirth educator, La Leche League Leader, WIC counselor?
6. Have you attended births in any capacity? Please elaborate.
7. Do you have any family or other responsibilities that would limit your availability as an apprentice?
8. Please explain how you see yourself dealing with being told what to do by someone who has authority over you.
9. Now explain how you see yourself handling a disagreement with someone in authority over you.
10. Do you have any physical conditions such as severe menstrual cramps, allergies, hypoglycemia, etc., which might limit your ability to work at full capacity?
11. At times, the demands of midwifery as an apprentice can be overwhelming. Please describe how you handle stress in your life. Give an example.

12. Tell us about your plans for midwifery, including where you would like to practice. For example, do you see yourself working in a birth center, opening a birth center, or being a homebirth midwife or a combination or something different? Do you want to work alone or in a group or partnership?
13. Would you have any interest in being offered a staff position at CCBC upon completion of your apprenticeship?
14. Are you fluent in any other language(s) besides English?
15. Are you sure you will always have a dependable car available?
16. Do you own a reliable cell phone?
17. Please indicate on a scale of 1-10 where you would consider yourself as an extrovert or an introvert using 1 as an extreme introvert and 10 as an extreme extrovert (*no right or wrong answer, we just want to know how you see yourself*).
18. What was your placement within your own family? Among siblings, were you the oldest, youngest, middle or an only child? Or perhaps your situation was unique. Please tell us.
19. Do you have the financial resources available to you to cover the costs of your training and the ability to live without a regular paycheck for the duration of your stay with us?
20. What other commitments do you have in your life that you must consider when considering an apprenticeship?
21. Tell me about your family. (husband, children, grandchildren)
22. What spiritual orientation do you have (if any)?
23. Are you affiliated with any church or religious organization? Would your affiliation have effect on your apprenticeship and/or future work as a midwife? (*For example: are you restricted from working on certain days or working with certain people?*)
24. How will your personal convictions influence the way you relate to patients of like and different beliefs from your own?
25. Are you ready to be on call 24 hours a day, seven days a week, including family birthdays and holidays? If not, what are your expectations or desires regarding time off?
26. Do you use any social (recreational) drugs, alcohol, cigarettes, or prescription medications?

27. What other commitments do you have in your life that you must consider when considering an apprenticeship?
28. Tell me about your family. (husband, children, grandchildren)
29. What spiritual orientation do you have (if any)?
30. Are you affiliated with any church or religious organization? Would your affiliation have effect on your apprenticeship and/or future work as a midwife? *(For example: are you restricted from working on certain days or working with certain people?)*
31. How will your personal convictions influence the way you relate to patients of like and different beliefs from your own?
32. Are you ready to be on call 24 hours a day, seven days a week, including family birthdays and holidays? If not, what are your expectations or desires regarding time off?
33. Do you use any social (recreational) drugs, alcohol, cigarettes, or prescription medications?
34. If you personally get a cold, have a headache or a stomach virus, how do you deal with it?
35. What contributions do you see yourself making to the birth center during your apprenticeship? How will you be an asset to the birth center and the midwives during your time as an apprentice?
36. Describe the qualities you like best about yourself.
37. What do you feel are your weaknesses?
38. Do you have any skills you would like for us to know about, such as computer skills, typing, teaching, cleaning, organizing, etc.?
39. What are your hobbies?
40. If you have ever begun an apprenticeship with someone else, who was (were) your preceptor(s) and why didn't you complete the apprenticeship?
41. If you are accepted as an apprentice, will you provide your own housing or need assistance finding low cost housing with us or someone else?
42. Do you have any expectations of how long your schooling and apprenticeship will take? Do your goals include a time frame for when you expect to become a midwife? Please explain.

43. Do you have any children still living at home? What are their ages? What are your arrangements for them while you attend prenatal and workdays? What arrangements do you have for them to be cared for when you are called out for a birth? What is your back up plan to this arrangement?
44. If you are married, please tell me how your spouse feels about your decision to become a midwife. Is he supportive, reluctant, or just doesn't care either way? (Please take your time and answer this question thoroughly.)
45. Please tell us what you think about "Right to Life" vs "Pro-Choice." Where do you stand on this issue? How would you deal with patients who have a history of abortion in their past?
46. What are your thoughts on the Biblical model of marriage and family?
47. What are your thoughts on gender identity and same sex partnerships or marriage?
48. What are your thoughts on infant circumcision?
49. What are your thoughts about vaccinations? And about the idea of mandatory vaccines?
50. Are you more interested in a temporary or full-time position?

If you are unmarried, please answer the following additional question(s)?

51. Are you currently involved in a relationship? If so, please explain and is this person supportive of your plans to become a midwife? Do you have plans to marry and if so will marriage change your plans in any way? If not in a relationship, are you looking for a serious relationship or a husband and how do you see such a relationship fitting into your plans to become a midwife? Please take your time and answer this question thoroughly and honestly. There is no right or wrong answer. We just want an honest answer.

Please send a photo of yourself and at least two references from former preceptors, midwives, or employees.

If you have any questions, please call one the numbers listed on the front of this form.

Completed forms may be FAXED to 361.336.0212

Or sent by e-mail to [ccbirthcenter@gmail.com](mailto:ccbirthcenter@gmail.com) (please put "Apprenticeship Inquiry" in the subject header)



CCBirthCenter.com

# CORPUS CHRISTI BIRTH CENTER

939 Ayers Street, Corpus Christi, TX 78404

Phone 361. 883.BABY (883.2229) or FAX 361.336.0212

Clinical Director and Senior Preceptor: Beth Overton, CPM

## Apprenticeship Agreement

\_\_\_\_\_  
*Apprentice's Full Name (please print)*

\_\_\_\_\_  
*Date*

I have read, understood and agree to follow to the best of my ability the most current copy of *Apprenticeship Policy Manual for the Corpus Christi Birth Center (revised May 2019)*. By signing this agreement, I commit to an apprenticeship with the Corpus Christi Birth Center for the dates listed at the top of this document.

By accepting an apprenticeship with the Corpus Christi Birth Center, I also agree to the following conditions:

If I become licensed to practice midwifery in Texas after working as an apprentice at the Corpus Christi Birth Center, I agree to not practice midwifery within 50 miles of the Corpus Christi Birth Center for the first year following my apprenticeship with the Corpus Christi Birth Center, unless the CCBC grants permission in writing for me to do so (*such as working as a staff Midwife at the Corpus Christi Birth Center*).

I agree to not accept as patients or clients anyone whom I met as a previous patient or client of the Corpus Christi Birth Center during my apprenticeship at the Center (*unless given permission to do so by the Director*).

*I agree to from now through the first **FIVE years** after becoming a Texas Licensed Midwife to:*

- ... NOT directly or indirectly solicit midwifery business from any current or former patients (clients) of The Corpus Christi Birth Center even if I did not meet them during my apprenticeship.
- ... NOT work for any existing birthing center within 50 miles of CCBC.
- ... NOT participate directly or indirectly with the establishment of or promotion of a new birthing center anywhere within 50 miles of CCBC.
- ... NOT share directly or indirectly with anyone outside of CCBC, ANY birth center business information obtained during my time working as an apprentice. This includes but is not necessarily limited to fee schedules, policies, procedures, anything written or produced by CCBC including documents, recordings, photographs or videos which have been used by CCBC.
- ... NOT encourage or influence any current employee, student, staff member or volunteer to leave the CCBC for any reason.
- ... not participate in any form of gossip or to speak ill of the CCBC nor any staff or students of the CCBC.

I am using in the following midwifery study program:

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I understand that all students must go through a mandatory 8-week trial period before they may apply for any additional time as a student at the CC Birth Center and that no decision for future apprenticeship training will be made prior to this trial period. If my commitment is longer than 8-weeks, I understand that I still must go through the mandatory trial period and evaluation before being allowed to continue my apprenticeship with CCBC.

I understand that knowing and following the rules for N.A.R.M., and my course work, and keeping the required documentation of all my work, is solely my own responsibility. I promise to ask my preceptor(s) to sign off on any necessary paperwork in a timely fashion so that there is adequate time to evaluate my work fully before the end of this agreement. I understand that the preceptor's decision to give me credit will be based on her professional evaluation of my skills, my understanding of those skills and my performance. I understand that the preceptor has the final authority on whether I have mastered a skill under her supervision.

Do you wish to consider a full-time apprenticeship (after the trial) or are you only seeking part-time?

\_\_\_\_\_

Would you like to be considered for a staff position with CCBC after you complete your training?

yes  no  undecided / If no, what are your plans?

\_\_\_\_\_

I agree to begin my apprenticeship on the following date: \_\_\_\_\_ and plan to arrive in

Corpus Christi on this date: \_\_\_\_\_ Are you in need of student housing?  yes  no

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*Apprentice's Signature*

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*Date*

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*Supervisor's Signature*

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*Date*