**From:** Rachel Blessington

**To:** DPH-Testimony, Reg (DPH)

**Subject:** Healthcare Facility Licensure Regulations

**Date:** Monday, October 28, 2024 2:40:19 PM

(testimony from public hearing conference call)

My name is Rachel Blessington and I represent Worcester Community Midwifery.

I am a Certified Nurse Midwife practicing in Central Massachusetts, I have also previously trained, certified and practiced as a Certified Professional Midwife, working in community birth over the past decade, with experience in home birth, hospital birth and birth center birth settings. My current practice is working towards launching an independent community birth center in Worcester.

We thank DPH and all those who have worked towards updating these regulations, these much needed changes are imperative in order to expand and maintain access to midwifery and birth center care in Massachusetts.

Additional appropriate updates to 105 CMR 140 must be implemented, I’d like to reiterate a few that my colleagues have mentioned. In order to enable strong and sustainable leadership and staffing of birth centers, it is imperative to expand the definition of birth assistant to include other trained, certified professionals who are skilled in community birth care and response to complications. Reducing this pool to only RNs with L&D experience is unnecessarily restrictive, excluding many appropriate possible team members who can provide safe and high quality care, often coming with more experience in the community birth setting than the typical RN with hospital L&D experience. The AABC Community Birth Assistant training, paired with other certified healthcare roles, make it possible for assistants to become valuable and safe team members from diverse backgrounds.

The clinical background requirement for administrative director is also restrictive and unnecessary, indeed professionals with public health, business and other backgrounds would bring vital skills and experience to enable the success of the birth center facility. It is also appropriate and crucial to remove language surrounding abortion and home medication restrictions, as mentioned by my colleagues, to enable midwives and other providers to serve our community in our full scope of practice.

Thank you.

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