

ETHICS STANDARD

Midwives: Code of Ethics

Introduction

The BC College of Nurses and Midwives' *Code of Ethics* is founded in and affirms the core values of midwifery. It articulates the ethical responsibilities of a midwife, in order to guide their professional practice and conduct in all situations.

Midwives are bound to this code as part of a regulatory process that serves in the interest of public safety.

Standards

PROFESSIONAL PRACTICE

1. The midwife's primary responsibility is to safeguard the well-being of the client and their newborn. To do so, the midwife:
 - a. Accepts and provides care to each client without discrimination (such as on the basis of age, disability, gender identity or expression, genetic characteristics, language, marital and family status, national or ethnic origin, political affiliation, race, religion, sex, sexual orientation, or socioeconomic status). This does not preclude instances where a midwife may reasonably refuse a client (such as where there are safety concerns, caseload, geographic or scope constraints).
 - b. Uses their knowledge, judgment and expertise to provide a high standard of midwifery care which respects individuals' needs, values and dignity.
 - c. Consults and/or transfers care in accordance with the standards and as necessary when a client's needs exceed the midwife's professional expertise or scope of practice.
 - d. Promotes physiologic birth and birth close to home within the context of safe clinical practice and client choice.
 - e. Ensures that no act or omission within their sphere of influence places a client at risk.
 - f. Does not compromise care for reasons of personal or institutional expedience.
 - g. Does not abandon a client in labour.
 - h. Does not practice midwifery while their ability to do so is impaired.
 - i. Acts in accordance with relevant legislation and the bylaws, standards and policies of their regulatory body.

RELATIONSHIPS AND ACCOUNTABILITY

2. The midwife develops a relationship of trust and partnership with the client. To do so, the midwife:

- a. Informs the client of the scope and limitations of their midwifery practice.
- b. Respects, upholds and practices informed choice and consent, leading to an evolving plan of care, in order to ensure the client's acceptance of responsibility for the outcomes of their choices.
- c. Respects the autonomy and rights of each client to make decisions about their care that the client determines is in their best interest.
- d. Advocates for the client.
- e. May respectfully choose to not provide care to which they conscientiously object; however, the emphasis on individual conscience should not deprive anyone of essential health services.
- f. Informs the client if for any reason the midwife is unable to provide care and assists the client in finding a suitable alternate care provider.
- g. Does not abuse the privileged midwife-client relationship.
- h. Recognizes the inherent power imbalance that exists within the midwife-client relationship and takes care to not take advantage of this imbalance for any reason.
- i. Collects, uses and discloses only as much health information as necessary; shares information only to benefit the client and only with those within the client's circle of care.
- j. Refrains from disclosing confidential information about a client without the consent of the client or the client's authorized representative, except where disclosure is required or authorized by the law.
- k. Provides midwifery care to each client until time of discharge, care is no longer wanted, or care has been terminated with appropriate notice.
- l. Commits to collaborative and respectful relationships with Indigenous clients through efforts to understand and implement the recommendations relevant to health care made in the report *Truth and Reconciliation Commission of Canada: Calls to Action*.

KNOWLEDGE, COMPETENCY, AND LEARNING

3. The midwife maintains and facilitates safe and competent midwifery practice in all environment and cultures. To do so, the midwife:

- a. Uses up-to-date, evidence-based professional knowledge and continuous professional development to maintain their own competence.
- b. Facilitates ethical research in practice.
- c. Assists learners, including students and colleagues, to develop and maintain professional competence.
- d. Works with policy and funding agencies to define needs for health services and to ensure that resources are fairly allocated considering priorities and availability.

CONDUCT

4. **Midwives act as effective role models by maintaining both professional and ethical conduct. Midwives should not engage in any activity that would adversely affect the honour, dignity, or credibility of the profession. To do so, the midwife:**
- a. Interacts respectfully and honestly with the people with whom they work and practice.
 - b. Builds a professional reputation based on their ability and integrity and advertises professional services only in a manner that upholds the dignity of the profession.
 - c. Does not take advantage of publicly funded programs for personal financial gain.
 - d. Does not use professional qualifications in the promotion of commercial products.
 - e. Does not accept any gift, favour or hospitality which might be reasonably seen to create a conflict of interest.
 - f. Is responsive in their communication and compliance with the requirements of their regulatory and professional bodies.
 - g. Treats all colleagues, regardless of health care discipline or training, with respect.
 - h. Recognizes the contribution and expertise of colleagues from other health care disciplines.
 - i. Recognizes human interdependence within their field of practice and seeks to resolve inherent conflicts.
 - j. Values their own personal health and wellness and takes steps to optimize meaningful co-existence of their professional and personal life.
 - k. Supports and sustains other midwives in their professional roles, and actively nurtures their own and others' sense of self-worth.

Revision history

Version #	Approved by board	Bylaw in-force	Description
1.0	March 1, 2026	April 1, 2026	Initial publication

Effective April 1, 2026, this ethics standard, and any amendments to it, is made a bylaw under the authority of the *Health Professions and Occupations Act, B.C.*

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