

**From:** [Sunset Advisory Commission](#)  
**To:** [Janet Wood](#)  
**Subject:** FW: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)  
**Date:** Monday, June 30, 2014 8:20:20 AM

---

-----Original Message-----

From: sundrupal@capitol.local [<mailto:sundrupal@capitol.local>]  
Sent: Saturday, June 28, 2014 2:34 PM  
To: Sunset Advisory Commission  
Subject: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)

Submitted on Saturday, June 28, 2014 - 14:33

Agency: DEPARTMENT STATE HEALTH SERVICES DSHS

First Name: Andi

Last Name: Seibold

Title: Doctor of Audiology and stay-at-home mom

Organization you are affiliated with:

City: Fort Worth

State: Texas

Your Comments About the Staff Report, Including Recommendations Supported or Opposed:

My comments are in regard to the Midwifery Board. Seeing as how the current review of the Midwifery Board is not due until 2016, it seems only appropriate that changes affecting that Board should not take place until the review year.

Furthermore, the Midwifery Board should remain under DSHS and not be moved to Licensing and Registration. I am familiar with DSHS as a licensed audiologist, and can attest that DSHS is the appropriate department to oversee and regulate midwifery, as it is certainly a health-related field, with licensed professionals offering professional services to clients who hire them. Furthermore, the Sunset Commission should hold its stance that midwifery be governed by other midwives and not be moved to the Board of Nursing. Midwives are not nurses, nor are nurses midwives, unless licensed as nurse midwives. They are not mutually exclusive.

Any Alternative or New Recommendations on This Agency:

As an audiologist, my professional associations and Licensing Board are made up of audiologists. The Medical Board consists mainly of doctors; The Board of Nursing is governed primarily by nurses. The Midwifery Board should be no different. Other midwives with expertise and evidence-based background for the professional should govern the Midwifery Board, not doctors. The care I have received by a midwife has been exceptional, individualized, prompt and family-centered. I was able to have the personal support of a midwife and student midwife while enduring a miscarriage and I am ever grateful to these women who served me with compassion and a tender heart when I needed it most.

I will continue to use licensed midwives for any future pregnancies and even my well-woman care. The one-on-one direct access I have to my midwife is a benefit to me, as a well-informed consumer. Additionally, the training licensed midwives undergo is in line with other health-care professionals, including a thorough clinical practicum that often spans longer than 12 months, as well as an intense written exam.

Texas is ahead of so many other states in regard to their view of midwifery. This valuable and evidence-based professional should continue to flourish and grow. Many women are encouraged to find midwifery choices in their search for pre-natal and well-woman care. We should support midwifery growth at the proper time (2016 review) and under the proper agencies that will allow for growth and autonomy within the profession. Out-of-hospital midwives are essential to a woman's right to birth as she chooses, and should absolutely be considered an integral part of the childbirth landscape of Texas.

My Comment Will Be Made Public: I agree