

Senate Inquiry into the administration of health practitioner registration by the Australian Health Practitioner Regulation Agency (AHPRA)

Submission - Prepared by [REDACTED] on 13 April 2011.

Terms of Reference – In this submission I will be referring to the following highlighted points:

On 23 March 2011 the Senate referred the following matter to the Finance and Public Administration References Committee for inquiry and report by 13 May 2011:

The administration of health practitioner registration by the Australian Health Practitioner Regulation Agency (AHPRA) and related matters, including but not limited to:

- (a) capacity and ability of AHPRA to implement and administer the national registration of health practitioners;
- (b) performance of AHPRA in administering the registration of health practitioners;
- (c) impact of AHPRA processes and administration on health practitioners, patients, hospitals and service providers;
- (d) implications of any maladministration of the registration process for Medicare benefits and private health insurance claims;
- (e) legal liability and risk for health practitioners, hospitals and service providers resulting from any implications of the revised registration process;
- (f) liability for financial and economic loss incurred by health practitioners, patients and service providers resulting from any implications of the revised registration process;
- (g) response times to individual registration enquiries;
- (h) AHPRA's complaints handling processes;
- (i) budget and financial viability of AHPRA; and
- (j) any other related matters.

I am writing this submission out of concern for the lack of birthing options available to women in my community, the suspension of our local private practice midwife's registration, and the protracted time frame over which her investigation has spanned.

Referring to point (c) in the Terms of Reference above I would like to express my disbelief in the fact that the NMBA have taken over 10 months to investigate allegations made against our private practice midwife, and at AHPRA's lack of response to my letter expressing support and genuine concern for our midwife, and requesting some answers to those concerns – Point (g) and (h).

Why wasn't my letter acknowledged, considering the Board meets every month? Why hasn't action been taken to resolve this investigation sooner? It is my understanding that [REDACTED] registration was suspended with virtually no notice, and she was given no opportunity to defend or clarify her actions. At the time, she had many women booked to birth with her including a close friend of myself. This was very difficult for both [REDACTED] and the family, who were forced to make alternative arrangements, at a very crucial and vulnerable time. They ended up birthing in [REDACTED] Hospital and had quite a traumatic experience feeling unsupported through the hospital system.

Referring to point (f) Our midwife has not only had her career taken away, but her livelihood as well. As a sole parent, with a dependent teenager at home, it must be very difficult for her to manage financially. [REDACTED] has also had the added expense of hefty legal fees related to this never ending investigation. [REDACTED] has been a registered midwife for more than 30 years, and has been attending women/families birthing at home for around 20 years. She has practised in the area for the past 8 – 9 years and has attended well over 100 births here in [REDACTED]. She is well respected and widely sought after, within the district and her midwifery services have been sorely missed.

In March last year she was inducted onto the [REDACTED] Honour Roll' acknowledging her excellent community service in working to improve the quality of life for women, children and families since moving to the [REDACTED] five years ago as an independent midwife. [REDACTED] is a very progressive community where homebirth is a very common and accepted birthing choice, however experienced private midwives are very scarce and women now have either had to travel away from home to access midwives, employ midwives for Melbourne (2 hours away), choose to birth in hospital, or choose to birth unattended or with a doula. Choices they would not be making or have to make if [REDACTED] was available to support them.

I feel for [REDACTED] and for the women seeking her services, and cannot believe the treatment she has had bestowed upon her by NMBA/AHPRA.

I understand that the Nurses Board is there to protect the public; we are the public. We live in a country town, and we know who we feel safe with. People talk. I regard this situation with [REDACTED] and our right to choose how where and with whom we give birth, as a basic human right.

This is a 'Human Rights 'issue.

I am aware that the NMBA and AHPRA are very new and transitioning into the new governance role, and this change over to National Registration, may be partly to blame for some of the confusion, delays and incompetence, we have been experiencing – **Points (c) (f) (g) and (h) .**

Yours sincerely

[REDACTED]