11/08/2009 Coralie Daniels

Ms Claire Moore Chair Senate Community Affairs Legislation Committee

By E-mail: community.affairs.sen@aph.gov.au

Dear Senator Moore

Re: Inquiry into Health Legislation Amendment (Midwives and Nurse Practitioners) Bill 2009 and two related Bills

I write to express my concern about the above bills. I understand that these bills will enable Medicare funding, access to the Pharmaceutical Benefits Scheme and professional indemnity premium support for midwives providing care for women to give birth in hospital.

Medicare funding for midwifery care is long overdue. It is not acceptable however to exclude homebirth from this funding and indemnity arrangement. By doing this Australia is totally out of step with nations such as the United Kingdom, Canada, The Netherlands and New Zealand.

These nations support the rights of women to choose homebirth and fund a registered midwife through their national health scheme. In New Zealand and the U.K women have a legislative right to choose homebirth.

The intersection of this legislation with the national registration and accreditation of health professionals will prevent homebirth midwives from registering. I believe this to be an unintended consequence and ask that you take steps to include homebirth within the Health Legislation Amendment (Midwives and Nurse Practitioners) and related Bills.

I support a system where all consumers are treated equally, with the same access to funding and the same insurance protection. Employing a private, well qualified nurse experienced in midwifery to attend the birth of your child should be readily available to any family in Australia in a way that supports any woman who, for whatever reason cannot or will not deliver in a hospital. I for one, felt that the risks of delivering a child in a hospital, although different, were considerable and I wanted to avoid it at all costs. Swine flu contamination, virulent strains of staff, busy hospital staff unable to attend if you are in trouble, lack of personalized attention, predisposition to interventionists strategies, the high hospital caesarean and episiotomy rate, post natal complications, difficulty getting good rest in hospital are all reasons why I stayed away from hospital and chose to employ a qualified midwife at home. Please reconsider this measure as everyone needs different things and homebirth midwives, in the main are dedicated, capable and excellent practitioners who deserve support not ostracism from the health system in which we operate.

Yours sincerely

Coralie Daniels