

8th July 2009
Diane Longworth

Ms Claire Moore
Chair
Senate Community Affairs Legislation Committee
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.

While the Federal Government's initiatives are welcomed, and will allow Australian women some choice in Maternity care for the first time ever, the exclusion of Homebirth practices is unacceptable. Women who choose to homebirth with a midwife in private practice deserve equal rights and benefits afforded women who choose hospital or even surgical birth.

The combination 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 also have concerns about the term 'eligible' midwives in relation to access to the MBS, PBS and PI insurance. Midwives in Australia have excellent education and are eligible for registration at the end of their degree or post-graduate diploma. I consider that any midwife who is eligible to be registered is competent to care for women in any setting including the community, as per the international definition of a midwife. Thus, beyond initial training in pharmacology for the PBS requirements, any registered midwife should be considered eligible to qualify for MBS, PBS and Indemnity Insurance. Registration requirements will be such that evidence of ongoing professional education is required for renewal of registration, so a registered midwife will remain up to date with current practice. Further barriers to practice will be such to make this legislation an empty promise, as few midwives will be able to undertake further unnecessary and expensive training.

Australia will be taking a backward step in denying women the right to homebirth with their choice of practitioner. I acknowledge that there are moves to continue hospital-based homebirths, so fail to understand why midwives in private practice are being discriminated against in this way. I can just imagine the furor that would happen if we legislated that doctors were not 'allowed' to work in private practice!

Many women will not meet the strict criteria set by our medical colleagues for hospital based homebirth programs, and many women will remain home to birth their babies and will be forced to do so without professional support from a registered midwife, this has the potential to lead to dangerous situations and a potential for poor outcomes.

Our sisters in New Zealand and the United Kingdom have a legislative right to choose homebirth and, in the Netherlands, public funding is only extended to women seeing an obstetrician IF they have complications to warrant this specialized care!

The fairest way to continue these positive steps is to allow women to choose their place of birth and the practitioner they wish to care for them. I support a system where the women are afforded this choice and are able to do so with equal funding and the protection of their carer having professional indemnity insurance.

Regards,

Diane Leigh Longworth.
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