



## **Submission to the Senate Community Affairs Committee – Inquiry into the National Registration and Accreditation Scheme for Doctors and Other Health Workers**

Dear members of the Senate Community Affairs Committee,  
Thankyou for the opportunity to provide a submission regarding *the National Registration and Accreditation Scheme for Doctors and Other Health Workers*.

The Queensland Branch of the Australian College of Midwives is a non profit making professional organisation that advocates of behalf of midwives and birthing women.

We wish to make the following comments with regard to the scheme, particularly with regard to its likely impact on midwives and their ability to provide a safe, quality service to childbearing women and their families.

*Requirement for professional indemnity insurance for all health care practitioners:*

- The requirement for professional indemnity is supported - all women and their families should have access to financial recompense for poor outcomes caused by poor practice.
- Midwives providing private practice home birth are currently uninsured because there is no access to an affordable professional indemnity insurance product in Australia. Therefore, without government assistance these midwives will become ineligible for registration.
- The government has provided tens of millions of dollars to medical practitioners to support their access to affordable indemnity insurance.
- **ALL** midwives must be given access to affordable professional indemnity insurance if it is to become a condition of registration.
- Consumer choice should not be adversely affected by the restriction of registration to those midwives eligible for government supported professional indemnity insurance (at this stage home birth midwives are likely to be excluded).
- Women will continue to home birth. The safety of mothers, and their babies, who chose home birth should not be endangered by reducing/eliminating access to midwifery care.
- Private practice homebirth midwives are likely to practice unregistered. All women and their families should have the right to seek assistance through the relevant registration authority concerning complaints about a midwives practice, however if a midwife is unregistered the registering authority will be unable to act.

*Activities restricted to specific registered health practitioners:*

- Birthing care was an activity restricted to midwives and relevant medical practitioners; however birthing care is not currently on the restricted list.
- Any unregistered care provider, such as Doula, will be able to provide birth care; this is likely to endanger mothers and babies.
- Mothers are more likely to use unregistered providers to attend them at home birth, due both to the lower cost of these providers in comparison to midwifery care and because midwifery care may become unavailable.
- Mothers and their babies would be better served by having access to registered midwives who are up to date with CPD and working within professional standards.

*One national board for each profession:*

- Although there will be separate registers for nursing and for midwifery there will be one combined board for both professions.
- Midwives will require guaranteed representation on the board.

*Continuing professional development (CPD):*

- The requirement to maintain and develop midwifery skills through a robust continuing professional development program is supported.
- The CPD framework provides an opportunity to ensure that midwives practicing in different spheres such as midwifery lead models, hospitals, and home birth maintain and develop the appropriate skills.
- Midwives working in home birth and midwifery lead models could be credentialed using the Australian College of Midwives Midwifery Practice Review Program – a peer and consumer holistic review of practice involving submission of a professional portfolio containing practice data and consumer feedback.

Hazel Brittain

President

For and on behalf of

The Executive of the Queensland Branch

Australian College of Midwives

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Contact Details:

Phone:

0732998023

0432003506

Postal Address:

PO Box 87

Deakin West

ACT

2600