

National Registration and Accreditation Implementation Project

Submission re: Exposure draft of Health Practitioner Regulation National Law 2009 (Bill B)

I am strongly opposed to two parts of this proposed legislation:

101 (1a) (ii) that the registered health practitioner must not practise the health profession unless professional indemnity insurance arrangements are in force in relation to the practitioner's practice of the profession

AND

Subdivision 6 General

148 Directing or inciting unprofessional conduct or professional misconduct

(1) A person must not direct or incite a registered health practitioner to do anything, in the course of the practitioner's practice of the health profession, that amounts to unprofessional conduct or professional misconduct.

Maximum penalty:

- (a) in the case of an individual—\$30,000, or
- (b) in the case of a body corporate—\$60,000.

Should this legislation go ahead, unchanged, it will effectively make it illegal for midwives in independent practice to attend homebirths. I can only assume this is an intended outcome of the legislation, as independent midwives have been practising without professional indemnity insurance for over eight years now.

Homebirth has been proven time and time again to be as safe as or safer than hospital birth for women with low risk pregnancies. And even if a woman is deemed 'high risk', it should be her right to choose where she will birth her baby. By introducing this legislation you are effectively taking away a woman's choice of birthing options. How can this be justified?

What about the independent midwives whose livelihoods will be taken away? Independent midwives must be registered with the Nursing Board in order to practice. These women have studied the profession and have received a qualification to practice. It is outrageous that this legislation will strip these women of their practice and income.

I propose that the draft legislation be amended to allow an exemption for midwives to practice without professional indemnity insurance, as they have done for the last eight years. Or at the very least, a temporary allowance be provided for independent midwives while the issue of finding indemnity insurance for private midwives is found.

Sincerely,

Kate Frawley