

The Secretary Senate Community Affairs Committee PO Box 6100 Parliament House Canberra ACT 2600

## Submission by the Australian College of Midwives to the Senate Inquiry into the administration of health practitioner registration by the Australian Health Practitioner Regulation Agency (AHPRA)

Prepared by:

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The Australian College of Midwives (ACM) is the peak professional body for Midwives in Australia, representing over 5 400 members. The ACM has been actively consulting with and advising local and federal Government committees and the regulatory authority to develop standards, codes and guidelines to inform the legal and professional practice of midwives in the provision of women centred care across the continuum of pregnancy, labour and birth, postnatally and early parenthood.

The ACM welcomed the introduction of the National Maternity Reforms and the commitment by Government to support women and promote access to midwifery led models of care, with the introduction of eligibility and access to MBS and PBS for midwives. This occurred on 1 November 2010. Midwives who met the criteria outlined in the *Guidelines and Assessment Framework for Registration Standard for Eligible Midwives* could apply for the endorsement. Currently there are 30 midwives, nationally, who have the eligibility endorsement on their registration. For many this has been a frustrating and arduous process. Specific issue highlighted include:

- Deviation from the written standard when midwives applications are processed midwives were refused the endorsement because they could not demonstrate five years postgraduate experience. The standard states three years.
- The referee to be a midwifery manager some midwives work in an environment where they do not have midwifery managers, but could obtain references from other health professionals which were not accepted
- The requirement of the referee to complete the reference by addressing the ANMC competency standards for Midwives an arduous task for the majority of midwifery managers, which resulted in midwifery managers reluctance to complete the reference.
- The way in which applications were processed midwives from certain states and territories were required to send their applications to one state and midwives from the remaining states and territories had to send their applications to another state. If the midwives' application inadvertently went to the wrong state the processing of the application was delayed further.
- The capacity of AHPRA to process the applications in a timely manner, given that many midwives had to wait a number of weeks for their applications to be processed. If the application was incorrect or incomplete, it was extremely difficult for some midwives to obtain information from AHPRA in relation to what was required in order to complete the application – each resubmission incurred a fee.

Another significant area of concern relates to the delay in the endorsement of the Safety and Quality Framework for Privately Practicing Midwives (PPM) by AHPRA and publication on the site. In January 2010, the Department of Health in Victoria was given the task of conducting a national consultation to develop a Safety and Quality Framework for PPM. The consultations were completed in May 2010 and a framework was developed and endorsed by the Victorian Minister for Health in June 2010. The framework was sent to AHPRA for endorsement in July 2010, but it was not until January 2011 that the standard was made public. This framework provides the professional and legal regulation around practice for PPM.

The ACM believes the following is required:

- All relevant information is accessible to midwives intending to apply for eligibility endorsement
- Adequate resources are made available to process the applications
- New standards, codes and guidelines endorsed by the national board are to be made available on the AHPRA website without delay.

The ACM looks forward to positive and timely outcome.

Tracy Martin President ACM.