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SUPPLEMENTARY SUBMISSION VIRGINIA THORLEY, OAM, LACTATION CONSULTANT

The term of reference which this supplementary submission addresses is: d) INITIATIVES TO ENCOURAGE BREASTFEEDING.

• Rebates from Medicare and health funds for lactation consultant services.

In my earlier submission (No. 97) I discussed a number of post-discharge issues that need to be addressed if the prevalence of breastfeeding is to be increased. To these I would like to add a further point, which is the funding of post-discharge services specifically to support breastfeeding.

Several submissions have recommended Medicare or health fund rebates for lactation consultant services, to make them more affordable to mothers. As an International Board Certified Lactation Consultant (IBCLC) with some years' experience in private practice, I believe that more mothers would make use of these services if they could obtain rebates from their health funds. Because most health funds do not reimburse their members for lactation consultations, mothers are reluctant to pay for these services. Instead, they may have to wait some time for a free appointment at a community child health centre, if they can book an appointment at all. There is no guarantee that the nurse they see will be a certified IBCLC. Consequently, from time I personally subsidise intending clients who need skilled help, by charging only a nominal fee in cases of hardship, or providing numerous free telephone follow-ups. I have no doubt that other IBCLCs do this from time to time, too.

Rebates from Medicare and private health funds would make it easier for mothers needing skilled assistance to continue breastfeeding, without obliging private-practice lactation consultants to subsidise their services. (Some IBCLCs have taken other work to subsidise their work with mothers and babies.)

Such rebates should be based on the provider of the lactation service holding current certification as an International Board Certified Lactation Consultant (IBCLC). IBCLCs come from a variety of professional backgrounds but are required to reach the same high standard of lactation-specific education and preparation to pass the certifying examination. The examination is an international one delivered round the world, and is set at a Masters level of difficulty. IBCLCs are required to recertify fifth yearly, to protect the public. Thus rebates should include IBCLCs from all backgrounds, not only midwives. That is, the IBCLC certification should be the criterion for a rebate for clients for lactation support services.

Thank you for considering this supplementary submission.

Virginia Thorley (First certified IBCLC in the original cohort of 1985 and currently still certified)