

Senate Inquiry into the administration of health practitioner registration by the Australian Health Practitioner Regulation Agency (AHPRA)

Submission - Prepared by Rachel Pilgrim on 13 April 2011.

Terms of Reference – In this submission I will be referring to the **points c, g, h and f:**

On 23 March 2011 the Senate referred the following matter to the Finance and Public Administration References Committee for inquiry and report by 13 May 2011:

The administration of health practitioner registration by the Australian Health Practitioner Regulation Agency (AHPRA) and related matters, including but not limited to:

- (a) capacity and ability of AHPRA to implement and administer the national registration of health practitioners;
- (b) performance of AHPRA in administering the registration of health practitioners;
- (c) impact of AHPRA processes and administration on health practitioners, patients, hospitals and service providers;
- (d) implications of any maladministration of the registration process for Medicare benefits and private health insurance claims;
- (e) legal liability and risk for health practitioners, hospitals and service providers resulting from any implications of the revised registration process;
- (f) liability for financial and economic loss incurred by health practitioners, patients and service providers resulting from any implications of the revised registration process;
- (g) response times to individual registration enquiries;
- (h) AHPRA's complaints handling processes;
- (i) budget and financial viability of AHPRA; and
- (j) any other related matters.

I am writing this submission out of concern for the suspension of my local private practice midwife's registration which took place almost ten months ago, and the unacceptable timeframe and circumstances over which this matter has occurred.

Referring to point **(c)** in the Terms of Reference above, this matter which has been handled by AHPRA, has had a enormous impact in my local community and midwife, due to the length of time it has taken to investigate and resolve.

During this time my midwife has been left with no livelihood and no indication as to when it will be resolved. Women in the community (some who were 38 and 39 weeks pregnant at the time) were left without their primary health carer as a result and forced to birth in much less than optimal circumstances as a result.

In Referring to point **(g) and (h)**. Following the suspension in registration of this midwife, a great many women and families wrote letters to AHPRA both to express their concerns for the way they acted, also to express their support for their midwife, and to gain some answers and clarity around how and why AHPRA had power to act in such an unjust manner. (Why was our midwives registration suspended with virtually no notice, and she was given no opportunity to defend or clarify her actions?) The responses to these letters have been predominantly absent, and in cases where women have received a response, their questions have not been adequately answered, if at all. I am aware that during the ten months this case has dragged on for, the NBV has been undergoing transition to a nation wide governing body (AHPRA), and this may be partly why timeframes and processes have blown out, however it clearly shows the current complaints handling process is somewhat flawed.

Why weren't our letters acknowledged, considering the Board meets every month? Why hasn't action been taken to resolve this investigation sooner?

Referring to point **(f)** Our midwife has not only had her career taken away, but her livelihood as well. She is a sole parent, with a dependent teenager having to now manage financially on her own with no income for ten months running. Not to mention the expense of hefty legal fees related to this investigation.

Women and families who had already booked and were paying or had paid our midwife were suddenly finding themselves having to fork out further fees for another midwife and

alternative options for their births.

Whilst I was not pregnant at the time, my husband and I are planning for more children in the near future and would without a doubt have used our midwife if and when the need arises. However if the matter is still unresolved, We will have to re-establish a relationship with another midwife which will take more time and money, which would not be the case if the matter had been handled appropriately in the first instance. I feel for our midwife and for the women seeking her services, and cannot believe the treatment she has had bestowed upon her by NMBA/AHPRA.

I understand that the Nurses Board is there to protect the public; we are the public. We live in a country town, and we know who we feel safe with. This matter touches on the basic human rights of how where and with whom we give birth with

This is a 'Human Rights 'issue.

Sincerely
Rachel Pilgrim