

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Supplementary Budget Estimates 2011-2012, 19 October 2011

Question: E11-423

OUTCOME 3: Access to Medical Services

Topic: MIDWIFE PROFESSIONAL INDEMNITY SCHEMES

Written Question on Notice

Senator Fierravanti-Wells asked:

- a) How many eligible midwives are currently participating in the scheme?
- b) How many were budgeted to be participating.
- c) Is there any data on the types of collaborative arrangements (e.g. are they predominantly with obstetricians, GPs or hospitals?)
- d) Have there been any claims made and if so what has been the Commonwealth's liability?
- e) What are the implications for a midwife's insurance and registration if their patient is treated in a public hospital? Are they able to continue to provide care once the patient is discharged? Has any midwife's eligibility for insurance under the scheme been affected by their patient being treated in the public system?

Answer:

- a) 29 (as at November 2011).
- b) 2010-11: 201.  
2011-12: 360.
- c) For the purposes of professional indemnity insurance for eligible midwives, information regarding the type of collaborative arrangement that a midwife has in place is only collected by the Commonwealth's contracted insurer (MIGA) at the time that a claim is made. Midwives must, as a condition of cover, undertake to ensure that they have an approved collaborative arrangement in place while practising as a midwife. As there have been no claims made to date, MIGA does not currently have any information available regarding collaborative arrangements.
- d) No formal claims have been made to date.
- e) Patients can be treated in a public hospital as a private patient by a privately practising midwife covered by MIGA as long as appropriate arrangements have been made with the public hospital for access to the hospital by the midwife.

Patients of an eligible midwife can also be treated as a public patient by public hospital staff without any impact on the midwife's insurance policy.

However, once the patient becomes a public patient, the eligible midwife must not continue to provide midwifery services to the patient as the Commonwealth-supported MIGA insurance policy will no longer respond to an incident while the patient is a public patient. The MIGA policy clearly excludes cover for the midwife for treatment of a public patient in a hospital.

With respect to registration, on 2 September 2011 the Nursing and Midwifery Board of Australia issued a position statement on the role of the registered midwife in private practice which indicates that midwives must not provide midwifery services without appropriate professional indemnity cover. This statement relates to when the woman is admitted to a health service as a public patient. The position statement can be found on the following site: [www.nursingmidwiferyboard.gov.au](http://www.nursingmidwiferyboard.gov.au)

Midwives who hold a MIGA professional indemnity policy can continue to provide care once the patient is discharged, providing the patient is no longer a public patient.

The Department is not aware of any midwives whose eligibility for insurance under the scheme has been affected by their patient being treated in the public system.