

Australian Health Ministers' Advisory Council
National Registration & Implementation Project
PO Box 2089
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Submission:

**Australian Health Ministers' Advisory Council
National Registration & Implementation Project
Exposure Draft- Health Practitioner Regulation National Law 2009**

To whom it may concern,

My name is Janie Nottingham. I am a midwife and a mother of six children. I welcome and support the initiative of the government to standardise and make national the registration process for health professions. The objective of this legislation to "protect the public" however does not seem to be apparent in the move to require midwives to have mandatory professional indemnity insurance when it is a well known fact that this is unavailable to midwives providing homebirth services and that the government has no intention of pursuing or providing a solution to this situation.

As an attendee of the Victorian forum to discuss Bill B I must express my profound disappointment and feeling of discrimination at the treatment of midwives and consumers asking for a solution to this problem. The Victorian health minister and DHS representatives were aggressive and dismissive in response to questions asking what will women do when registered midwives can no longer attend women in their homes lawfully. In Victoria this legislative requirement will result in approximately 30 midwives out of work and forced to abandon businesses. It will affect a much larger number like myself who also attend the occasional homebirth but do not work solely in homebirth. The effect of being told you are unable to do something that is safe, that is supported by evidence, and that is deeply satisfying to women in your care is devastating.

It perplexes me why the state minister will not represent midwives and acknowledge the unfairness and ramifications to midwives and women of this situation. It is untenable. It was stated that there was no intention for homebirth to be shut down and yet not once in our state of Victoria has a home birth midwife been consulted on a homebirth policy or program! It is a telling picture of what the government is prepared to wash its hands of and of the undercurrent

at play. It may not be the intention of the project committee to out law midwives but in the hands of the current government it will be the result.

I request that an exemption be given to midwives who currently provide homebirth services until a feasible solution to the professional indemnity situation is found.

The definition of a midwife is something that I hold dearly in my heart, my mind and my soul when I am in service to a woman. It is significant in what it is and what it means. *Midwife* means *with woman*. The International definition of a Midwife that is accepted and supported by nursing and midwifery councils is encompassing, it is directive, it is a framework for care and it includes the statement that practice may take place in any setting. The fine detail in some of this proposed legislation will redefine midwifery. Is it acceptable to say that is just an unfortunate consequence that we can do nothing about? In my opinion it is discriminatory and a very calculated attempt to disempower women and subordinate midwives.

I request that the title Midwife Practitioner be removed from the legislation, there is no definition of what this is, how one would become one and what is required to be one. The International College of Midwives Definition eliminates the need for a hierarchical structure of midwives, to us a midwife is a midwife is a midwife.

I also attach for your consideration the question I posed to my current governing board of what would happen in the event I attended a birth after July 2010, personally I think there should be a detailed answer to this available now to enable people to either cease practice or to step into the system and become obstetric nurses, for that is all we shall be once you take away our scope of practice and confine us to the walls of an institution.

Janie Nottingham

Registered Midwife.