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To whom this may concern

**Re: Review of registration standard for the eligible midwife**

Australian College of Nursing (ACN) welcomes the opportunity to provide a response to the public consultation paper on the proposed Registration standard endorsement for scheduled medicines for eligible midwives dated October 2014.

ACN offers in principle support for the Nursing and Midwifery Board of Australia's (the National Board) proposal to combine two current standards and replace them with the proposed revised standard establishing the requirements for endorsement for scheduled medicines for an eligible midwife. Having one updated standard provides clearer guidance and would reduce the regulatory complexity that surrounds the process of gaining and maintaining endorsement as an eligible midwife. ACN is, however, concerned about the National Board's proposal to remove requirements that are currently embedded in the existing standards.

Registration standards are the key documents that, according to the National Board, '*define the requirements that applicants, registrants or students need to meet to be registered*'. For this reason any removal of requirements must be judiciously undertaken. ACN reserves support for the proposed draft until the removal of the registration requirements is further explained. Furthermore, while supporting a single standard, we urge the National Board to carefully consider how this will affect future regulatory reform. In particular the impact this may have on broader midwifery prescribing. An adaptive regulatory system that enables workforce development and innovation is imperative.

The attached submission outlines our concerns in greater detail. We look forward to the next stage of consultation. Please do not hesitate to contact me for further discussion of ACN's feedback.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Debra Thoms', is written in a cursive style.

Adjunct Professor Debra Thoms FACN (DLF)  
Chief Executive Officer

15 December 2014

## Public consultation paper

### Proposed registration standard endorsement for scheduled medicines for eligible midwives

#### Responses to questions

##### **Q1. Is the content of the draft revised registration standard helpful, clear, relevant and more workable than the current standards?**

It is ACN's view that the content of the draft revised registration standard is helpful, clear and relevant and appropriately responds to the anticipated end of transition arrangements in June 2015 due to the availability of prescribing courses for midwives. Combining the two current registration standards into one provides more streamlined information on the requisite qualifications and experience that a midwife must demonstrate when seeking and maintaining endorsement for scheduled medicines for eligible midwives. ACN notes we urge the Board to carefully consider how the creation of a single standard will affect any future regulatory reform to enable broader midwifery prescribing.

##### **Q2. Should the registration standard require an eligible midwife to practice across the continuum of care or should eligible midwives be able to have a specified context of practice listed on their notation?**

ACN is not in principle opposed to the idea of having a specified context of practice listed in an eligible midwives' notation, however, this inclusion requires more comprehensive consultation. ACN acknowledges that this change may be a responsive step that recognises the variation in midwifery service type and extent across the health system. Opening up eligibility to midwives with a narrow or specialised context of practice could increase the number of eligible midwives available to provide Medicare rebateable services in private practice and enable greater flexibility in the development of midwifery service models. Conversely, the inclusion of a specified context of practice could lead to workforce fragmentation and undermine the model of continuum of midwifery care that incorporates services across pregnancy, labour, birth and post-natal care.

ACN recommends a broader and more thorough examination of the likely costs and benefits of including a 'specified context of practice' in the proposed registration standard. Such an examination should include the question whether the proposed inclusion of a 'specified context of practice' best supports known models of safe and cost effective maternity care. Empirical evidence shows that the continuums of midwifery care such as facilitated by a caseload model of care results in care outcomes that are safe and cost effective<sup>1</sup>. Further, the impacts of this change must be canvassed for possible unintended consequences and discussed with stakeholders before the National Board commits to undertaking this significant change.

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<sup>1</sup> Tracy, S, Hartz, D, Tracey, M, & Allen, J et al. 2013, 'Caseload midwifery care versus standard maternity care for women of any risk: M@NGO, a randomised controlled trial', *Lancet*, vol. 382, pp.1723-1732.



**Q3. Is there any content that needs to be changed or deleted in the registration standard?**

Some content changes will be dependent on the inclusion or exclusion of the current registration requirements. For example, if the final determination is not to include 'specified context of practice' the wording to appear on the register may need to be adjusted to emphasize competence to provide care across the continuum of midwifery care.

**Q4. Is there anything missing that needs to be added to the registration standard?**

The registration standard may require a definition of 'specified context of practice'. The continuum of midwifery care is appropriately defined within the proposed standard, therefore, if 'specified context of practice' is included in the endorsed version of the standard, a definition will be required.

**Q5. Do you have any other comments on the registration standard and options presented?**

ACN has the following concerns about the criteria identified for removal within the consultation paper:

- **Current competence to provide pregnancy, labour, birth and postnatal care to women and their infants**
  - ACN's primary concern with the removal of this criterion is that it is not known where and how this competence will feature in a code or guideline issued by the Nursing and Midwifery Board of Australia in the future. For exclusion of the 'current competence' criterion to be acceptable to ACN, the documents envisaged to contain this criterion should be presented as part of the consultation process.
  - ACN also queries the rationale for not explicitly stating in the proposed standard the need for midwife competence to provide pregnancy, labour, birth and postnatal care to women and their infants. Is it assumed that a midwife demonstrates these competencies by way of meeting the combined registration requirements? Given that this competency criterion is a key feature of both the current registration standards, the rationale behind its removal should be fully justified. Furthermore, how the current criterion for competence in pregnancy, labour, birth and postnatal care will be embedded in the future requirements for the registration standard endorsement for scheduled medicines for eligible midwife requires explanation.
  
- **Successful completion of an approved professional practice review program for midwives working across the continuum of care**
  - The current requirement for an eligible midwife to demonstrate continuing competence is to successfully complete a practice review program covering the continuum of midwifery care every 3 years. The consultation paper proposes that this criterion be removed. ACN is of the view that the Board should have provided a more detailed justification for removing this criterion. A professional practice review is an explicit measure of competence. Employers of midwives usually have policies in place that ensure their midwives' competence, however without a regular professional practice review such assurances are not in place for privately practicing midwives. ACN considers that it should be a requirement for a midwife in private

practice to demonstrate competence in a professional practice review should they seek continued endorsement as an eligible midwife. The proposal to remove the requirement for a professional practice review could have safety and quality implications and potentially diminish regulatory assurances. This is a significant step and in ACN's view must be given serious consideration.

- ACN considers unacceptable the non-committal suggestion in the public consultation paper that the criteria *may be* included in a code or guideline issued by the National Board in the future. It is not satisfactory to propose the removal of the professional practice review without providing a rigorous evaluation of this step and a clear plan for how competency will be measured and assured in the future.

It is the view of ACN that the proposals to remove registration requirements may be premature, not having been the subject of broader and more comprehensive consultation. To support the case for removing registration requirements, the strategic intent for the changes must be explained including giving judicious consideration to the impacts of the proposed changes. ACN seeks to understand how the removal of these key requirements will be accounted for in the future.

Finally, ACN queries the assessment made on page 11 of the *National Board's Statement of assessment against AHPRA's procedures for development of registration standards and COAG principles for best practice regulation*. In point 3, the National Board states '*The proposed standard is a combination of the currently approved registration standards and does not change the current regulatory burden from the currently approved standards*'. ACN reiterates our concerns that the consultation paper only gives a loose indication that the registration requirements being removed will appear in supporting documentation. This is not consistent with the determination above that the proposed standard will not change the current regulatory burden.