Registration standard: Endorsement for scheduled medicines for midwives

Effective from 1 January 2017

Summary

This registration standard sets out the Nursing and Midwifery Board of Australia’s (NMBA) requirements for endorsement for scheduled medicines for midwives under section 94 of theHealth Practitioner Regulation National Law, as in force in each state and territory (the National Law).

Does this standard apply to me?

This registration standard applies to midwives who hold registration as a midwife in Australia, who are applying for or renewing an endorsement for scheduled medicines.

What must I do?  
  
When applying for endorsement for scheduled medicines as a midwife, a midwife must be able to demonstrate all of the following.

1. Current general registration as a midwife in Australia with no conditions or undertakings relating to unsatisfactory professional performance or unprofessional conduct.
2. Registration as a midwife that is the equivalent of three years’ full-time clinical practice (5,000 hours) in the past six years that is either:

* across the continuum of care, or
* in a specified context of practice

from the date when the complete application seeking endorsement for scheduled medicines is received by the NMBA.

1. Successful completion of:

* an NMBA-approved program of study leading to endorsement for scheduled medicines, or
* a program that is substantially equivalent to an NMBA-approved program of study leading to endorsement for scheduled medicines as determined by the NMBA.

Wording to appear on the register

An endorsed midwife qualified to prescribe schedule 2, 3, 4 and 8 medicines and to provide associated services required for midwifery practice in accordance with relevant state and territory legislation.

Ongoing requirements for endorsement

Ongoing endorsement by the NMBA is conditional on the midwife complying with the current:

1. NMBA-approved *Continuing professional development registration standard, Recency of practice registration standard, Criminal history registration standard* and *Professional indemnity insurance arrangements registration standard*
2. any other applicable codes and guidelines approved by the NMBA, and
3. for midwives who are privately practising midwivesthe *Safety and quality guidelines for privately practising midwives*.

What does this mean for me?

At renewal of registration

When you apply to renew your registration, you are required to declare that you comply with the ongoing eligibility requirements for endorsement as set out in this registration standard.

During the registration period

Your compliance with this registration standard may be audited from time to time and may also be checked if the NMBA receives a notification about you.

Evidence

You should retain records as evidence that you meet the requirements of this registration standard in case you are audited.

What happens if I don’t meet this standard?

If you don’t meet the criteria of this registration standard you will not be eligible for endorsement.

The National Law establishes possible consequences if you do not meet the ongoingrequirements of this standard, including that:

* the NMBA can impose conditions on your registration or refuse renewal of registration or endorsement (sections 82 and 112 of the National Law), and
* registration standards, codes or guidelines may be used in disciplinary proceedings against you as evidence of what constitutes appropriate practice or conduct for the nursing and midwifery professions (section 41 of the National Law).

Authority

This registration standard was approved by the Australian Health Workforce Ministerial Council on 30 October 2015.

Registration standards are developed under section 38 of the National Law and subject to wide-ranging consultation.

Definitions

Approved program of study means an educational program to develop a midwife’s knowledge and skills in prescribing medicines that has been accredited by the Australian Nursing and Midwifery Accreditation Council (ANMAC) and approved by the NMBA for the purpose of enabling the midwife to seek endorsement, under section 94 of the National Law, to prescribe schedule 2, 3, 4 and 8 medicines, in accordance with relevant state and territory legislation.

Clinical practice means either the continuum of midwifery care or context of practice as defined below.

* Continuum of midwifery care (pregnancy, labour, birth and postnatal care) incorporates antenatal care, intrapartum care and postnatal care for women and their infants. It includes clinical assessment, exercise of clinical judgment, planning, implementation, monitoring and review, responding to maternity emergencies, assessment and care of the newborn infant, management and administrations of medicines and the judicious use of diagnostic investigations, consultation and referral.
* Context of practice means the parameters that define an individual’s midwifery practice. These include practice across the continuum of care, antenatal care, intrapartum care, postnatal care and lactation support.

**Nursing and Midwifery Board of Australia (NMBA)** means the national body responsible for the regulation of nurses and midwives in Australia.

# Unprofessional conduct of a registered health practitioner means professional conduct that is of a lesser standard than that which might reasonably be expected of the health practitioner by the public or the practitioner’s professional peers, and includes:

# a contravention by the practitioner of the National Law, whether or not the practitioner has been prosecuted for, or convicted of, an offence in relation to the contravention

# a contravention by the practitioner of (i) a condition to which the practitioner’s registration was subject; or (ii) an undertaking given by the practitioner to the National Board that registers the practitioner

# the conviction of the practitioner for an offence under another Act, the nature of which may affect the practitioner’s suitability to continue to practise the profession

# providing a person with health services of a kind that are excessive, unnecessary or otherwise not reasonably required for the person’s wellbeing

# influencing or attempting to influence, the conduct of another registered health practitioner in a way that may compromise patient care

# accepting a benefit as inducement, consideration, or reward, for referring another person to a health service provider or recommending another person use or consult with a health service provider

# offering or giving a person a benefit, consideration or reward in return for the person referring another person to the practitioner or recommending to another person that the person use a health service provided by the practitioner, and

# referring a person to, or recommending that a person use or consult another health service provider, health service, or health product, if the practitioner has a pecuniary interest in giving that referral or recommendation, unless the practitioner discloses the nature of that interest to the person before or at the time of giving the referral or recommendation.

**Unsatisfactory professional performance** of a registered health practitioner, means the knowledge, skill or judgment possessed, or care exercised by, the practitioner in the practice of the health profession in which the practitioner is registered is below the standard reasonably expected of a health practitioner of an equivalent level of training or experience.

Note: The NMBA and the Australian Health Practitioner Regulation Agency (AHPRA) operate in a co-regulatory model in some jurisdictions and may not be the only entities involved in undertaking assessment related to a notification.In co-regulatory definitions these terms may be described differently but have the same intent.

Review

This registration standard will be reviewed from time to time as required. This will generally be at least every five years.

Last reviewed: 1 January 2017

This standard replaces the previously published registration standard from 1 July 2010.