Review of the registration standard endorsement for scheduled medicines for eligible midwives

Questions		Feedback	
1.	Is the content of the draft revised registration standard helpful, clear, relevant and more workable than the current standards?	Midwives Australia finds the draft revised registration standard clear in most places with an exception noted below. Midwives Australia supports the removal of the requirement for an additional 20 hours of CPD. Midwives Australia is concerned that the amalgamation of the "Eligible midwife registration standard" and the "Registration standard for endorsement for scheduled medicines for midwives" may reduce the ability for midwives to receive a Medicare provider number however, this is not a priority. Midwives Australia recommends that the requirements be clarified in the standard, particularly whether the requirement for 5000 hours in the last six years is for initial endorsement as an eligible midwife, or is an ongoing requirement (i.e. preventing endorsed eligible midwives working part time). This is concerning to our members who believe that this point is extremely unclear. In addition eligible midwives are concerned about receipt of conditions on their registration once endorsed meaning the loss of endorsement. This needs to be clarified.	
2.	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?	Midwives Australia strongly supports the retention of the requirement that clinical practice occurs across the continuum of care in the registration standard. Significant concerns exist about the practical application of provision of a Medicare provider number to midwives with a limited scope of eligible midwife practice and the complexities of ensuring consumer safety in these circumstances. Additionally Midwives Australia asks the NMBA to reflect on the intent of the reform agenda – which was to increase access to midwives across the full scope of midwifery practice. Extending endorsement to midwives who have a limited scope of practice is not consistent with this aim and additionally increases fragmentation and reduction of midwifery scope to finite tasks.	
3.	Is there any content that needs to be changed or deleted in the registration	Registration as a midwife constituting the equivalent of 3 years full time / 5000 hours within the past 6 years across the continuum of care or specified context of practice.	

	standard?	Midwives Australia does not agree with the time frame of three years full time or 5000 hours over six years as a prerequisite an endorsement for scheduled medicines and recommends that this requirement is deleted from the registration standard.
		A midwife, once registered, has under the International Confederation of Midwives definition of a midwife the ability to work to the full scope of midwifery practice. There is no additional scope of practice requirements for eligible midwives, other than prescribing and this is dealt with in the educational requirements.
		Midwives Australia has a strongly held view that there is no evidence that a specific number of hours over a period of time (i.e. 3 years/5000 hours in six years) increases competence. Midwives Australia also believes that hours do not increase safety for the public, which is the remit of the regulator.
		The inclusion of this criteria limits the ability for safe, sustainable development of self-employed midwifery workforce. Graduates and midwives who have less than three years' experience are unable to move into self-employed practice, limiting options for education and then subsequent employment into private midwifery practice. Midwives Australia would accept a period of supervision (e.g. one year) within an approved practice could be an alternative model for graduate midwives. We would also agree with this being expressed in hours or in a usual caseload for one year (e.g. 40 births).
		We also reiterate our earlier point that midwives appear to be required to fulfill this standard on an ongoing basis, which means that all eligible midwives would require 5000 hours of practice within the last 6 years to remain eligible. This would be difficult to maintain if you had competing priorities such as an academic, teaching or managerial role or took a period of extended leave.
4.	Is there anything missing that needs to be added to the registration standard?	No.
5.	Do you have any other comments on the registration standard and options presented?	Midwives Australia has expressed ongoing concern about the overlapping nature of consultations and projects being undertaken and find it difficult to fully comment (hence this later reply) pending release of various other outcomes including project undertaken by Price Waterhouse Coopers on Supervision for

Midwives Australia December 2014

Private Midwives.