

SA Health

Policy

Midwifery Prescribing in Public Health Services in South Australia

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Version 1.0

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Government
of South Australia

SA Health

1. Name of Policy

Midwifery Prescribing in Public Health Services in South Australia

2. Policy statement

This policy provides the mandatory requirements for Nursing and Midwifery Board of Australia (NMBA) endorsed midwives to prescribe scheduled medicines 2, 3, 4 and 8 in public maternity health services, in accordance with the [Health Practitioner Regulation National Law \(South Australia\) Act 2010](#) and [Controlled Substances Act 1984 \(South Australia\)](#).

3. Applicability

This policy applies to all employees and contracted staff of SA Health; that is all employees and contracted staff of the Department for Health and Wellbeing (DHW) and Local Health Networks (LHNs) including state-wide services aligned with those Networks.

Specifically, it is applicable to midwives, obstetricians, obstetric general practitioners, general practitioners, anaesthetists, neonatologists, paediatricians, allied health, neonatal and maternity community services.

4. Policy principles

SA Health's approach to midwifery prescribing in public health services is underpinned by the following principles:

- > We support NMBA endorsed midwives to prescribe within their LHN public maternity health services in accordance with their full scope of practice and the [Health Practitioner Regulation National Law \(South Australia\) Act 2010](#).
- > We promote collaborative work environments with clear shared understanding of the role and responsibilities of the midwife prescriber.
- > We advocate for safe and quality midwifery prescribing practice which is supported by quality improvement activities and a contemporary clinical governance framework.
- > We promote safe, quality and woman-centred practice which is achieved by collaborating and consulting with our professional partners.

5. Policy requirements

Eligibility for Midwives to Prescribe

To be eligible to prescribe as a midwife within SA Health, LHNs must ensure midwives:

- > Meet the NMBA [Registration Standard: Endorsement for scheduled medicines for midwives](#).
- > Hold the NMBA [endorsement for scheduled medicines for midwives](#)
- > Attain a Pharmaceutical Benefits Scheme (PBS) Prescriber Number from the Australian Government
- > Be credentialed by the LHN Nursing and Midwifery Credentialing Committee to prescribe with a notation of 'endorsed prescriber' on the SA Health Credentialing and Scope of Clinical Practice Database, and
- > Meet and maintain the additional requirements for midwives with scheduled medicines endorsement as specified in the NMBA [Registration standard: Continuing professional development](#).

Prescribing Midwives

Eligible midwives who prescribe in SA Health must:

- > Understand and act in accordance with the following legislation:
 - [Health Practitioner Regulation National Law \(South Australia\) Act 2010](#), and
 - [Controlled Substances Act 1984 \(SA\)](#).
- > Apply the [National Midwifery Guidelines for Consultation and Referral \(4th edition\)](#) to their prescribing practice to ensure appropriate and timely collaboration and consultation with and referral to other health care providers to ensure quality, safe and woman centred practice within inpatient and outpatient settings.
- > Take part in safety and quality activities related to prescribing practice as outlined by the LHN Nursing and Midwifery Credentialing Committee.
- > Maintain a prescribing list developed in partnership with the LHN lead pharmacist, midwifery and obstetric leadership, consistent with the midwife's scope and context of practice, and approved by the LHN Nursing and Midwifery Credentialing Committee.
- > Work in collaboration with medical officers, other midwives, pharmacists, and other stakeholders to ensure they are informed of and included in the plan of care and ensure the delivery of safe, quality, woman centred care.
- > Ensure consumers are supported to make informed decisions/choices about their treatment in line with the [Consent Policy](#).
- > When prescribing for inpatients, document the prescribed medication on:
 - National Inpatient Medication Chart (NIMC) or
 - Electronic Medical Record (EMR).
- > When prescribing for outpatients:
 - If prescribing outside of PBS midwife items, the midwife prescriber must ensure the woman understands the cost implications of being prescribed non-PBS subsidised medicines (a medical officer may be offered as an alternative solution to limit the potential cost on the consumer)
 - Prescribing midwives must not dispense outpatient prescriptions unless specified under and approved LHN Standing Medication Order, and
 - Prescribing midwives must partner with and inform the responsible/rostered medical officer regarding diagnostic investigations which may result in the prescriptions of medicines.
- > Comply with [Appendix 1: Midwifery Prescribers Mandatory Instruction](#).

LHN Governance

The LHN Credentialing Committee for Nurses and Midwives must ensure that:

- > Midwives endorsed to prescribe meet the requirements of the [Credentialing and Defining Scope of Clinical Practice for Midwives Policy](#), and
- > Where prescribing forms part of the scope of clinical practice, it must be recorded in the [Credentialing and Scope of Clinical Practice System](#) as part of the credentialing process.

6. Mandatory related documents

The following documents must be complied with under this Policy, to the extent that they are relevant:

- > [Clinical Governance for Advanced Practice and Extended Scope of Practice Roles Policy](#)
- > [Consent Policy](#)

- > [Controlled Substances \(Poisons\) Regulations 2011](#)
- > [Controlled Substances Act 1984 \(SA\)](#)
- > [Credentialing and Defining Scope of Clinical Practice for Midwives Policy](#)
- > [Credentialing and Scope of Clinical Practice System \(CSCPS\)](#)
- > [Criminal and Relevant History Screening Policy](#)
- > [Emergency Management Act 2004 \(SA\)](#)
- > [Health Care Act 2008 \(SA\)](#)
- > [Health Practitioner Regulation National Law \(South Australia\) Act 2010](#)
- > [National Midwifery Guidelines for Consultation and Referral \(4th Edition\)](#)
- > [Nursing and Midwifery Board of Australia's standards, codes and guidelines](#)
- > [Performance Review & Development Policy](#)
- > [Perinatal Emergency Education Policy](#)

7. Supporting information

- > [Australian Health Practitioners Regulation Agency, Glossary](#)
- > [Department of Health and Aged Care - Woman-centred care: Strategic directions for Australian maternity services](#)
- > [Informed Consent](#)
- > [NMBA Registration standard: Endorsement for Scheduled Medicines for Midwives](#)
- > [NPS Medicinewise - What consumers want to know about medicines](#)
- > [SA Health and Wellbeing Strategy 2020-2025](#)
- > [SA Health Nursing and Midwifery Strategic Directions 2023-2026](#)
- > [SA Health Statewide Midwifery Framework](#)
- > [SA Rural Nursing and Midwifery Workforce Plan 2021-2026](#)
- > [World Health Organisation, Guide to Good Prescribing- a practice manual](#)

8. Definitions required for prescribing

- > **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.
- > **Continuum of care:** means the incorporation of antenatal care, intrapartum care and postnatal care for women and their infants.
- > **Dispensing:** means the preparation, packaging, labelling, record keeping and supply of the prescribed medicine(s) for a client to take later. Dispensing includes taking steps to review the pharmaceutical and therapeutic suitability of the prescribed medication for its intended use, as well as counselling of the client to provide them with the information required to use the prescribed medicine(s) safely and effectively.
- > **Endorsed midwife:** means a midwife who holds the NMBA *Endorsement for scheduled medicines for midwives*. Holding the endorsement means that the midwife has met the requirements of the NMBA *Registration standard: Endorsement for scheduled medicines for midwives*, is qualified to prescribe scheduled medicines and provide associated services required for midwifery practice in accordance with relevant state and territory legislation.

- > **Medical officer:** means a medical officer in this document refers to an obstetrician, general practitioner obstetrician, and responsible rostered medical officers.
- > **Obstetrics:** means medical science that specialises in the care of women from the onset of pregnancy, through childbirth and postpartum period.
- > **Privately Practising Midwife (PPM):** means a registered and endorsed midwife who is self-employed or employed within a private group practice.
- > **Scope of clinical practice:** means the roles, functions, responsibilities, activities and decision-making capacity which midwives within the profession are educated, competent and authorised to perform. The scope of clinical practice is determined by legislation and professional standards such as Midwife standards for practice, Code of conduct for midwives and Codes of ethics for midwives.
- > **Statewide services:** means Statewide Clinical Support Services, Prison Health, SA Dental Service, BreastScreen SA and any other state-wide services that fall under the governance of the Local Health Networks.
- > **Woman:** means the person giving birth. The words woman/women/mother/she/her have been used throughout this policy as most pregnant and birthing people identify with their birth sex. However, for the purpose of this policy, these terms include people who do not identify as women or mothers, including those with a non-binary identity. All clinicians ask those that are pregnant what their preferred term is and ensure this is communicated to the healthcare team.
- > **Woman-centred care:** means and recognises the woman's baby or babies, partner, family, and community, and respects cultural and religious diversity as defined by the woman herself. Woman-centred care considers the woman's individual circumstances, and aims to meet the woman's physical, emotional, psychosocial, spiritual, and cultural needs. This care is built on a reciprocal partnership through effective communication. It enables individual decision-making and self-determination for the woman to care for herself and her family. Woman-centred care respects the woman's ownership of her health information, rights and preferences while protecting her dignity and empowering her choices.

9. Compliance

This policy is binding on those to whom it applies or relates. Implementation at a local level may be subject to audit/assessment. The Domain Custodian must work towards the establishment of systems which demonstrate compliance with this policy, in accordance with the requirements of the [Risk Management, Integrated Compliance and Internal Audit Policy](#).

Any instance of non-compliance with this policy must be reported to the Domain Custodian for the Clinical Governance, Safety and Quality Policy Domain, and the Domain Custodian for the Risk, Compliance and Audit Policy Domain.

10. Document ownership

Policy owner: Domain Custodian for the Clinical Governance, Safety and Quality Policy Domain

Title: Midwifery Prescribing in Public Health Services in South Australia Policy

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Contact for enquiries: Health.NursingandMidwifery@sa.gov.au

11. Document history

Version	Date approved	Approved by	Amendment notes
1.0	15/02/2024	Chief Executive, DHW	New Policy

12. Appendices

1. Midwifery Prescribers Mandatory Instruction
2. Compliance Indicators Mandatory Instruction

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Appendix 1: Midwifery Prescribers Mandatory Instruction

To ensure safe, quality, and effective prescribing of medicines by endorsed midwives, LHNs in conjunction with the endorsed midwife must comply with the following Mandatory Instruction to meet the requirements of this policy.

1. Context of Practice

NMBA endorsed midwives able to prescribe within SA Health must only provide care in the following practice contexts:

- > Continuum of care (antenatal, intrapartum, postnatal)
- > Antenatal
- > Postnatal, and
- > Antenatal and postnatal.

The midwife prescriber must:

- > Maintain professional partnerships and work collaboratively with the local responsible/on-call/rostered medical officer and other care providers, and
- > Ensure appropriate communication, collaboration and documentation, to facilitate the right care at the right time for the woman and her family.

2. Midwifery Prescribing Requirements

To ensure safe, quality and connected care, a midwifery prescription must incorporate the following practices:

- > Use the many safety nets to guide safe practice:
 - [SA Perinatal Practice Guidelines](#)
 - [Therapeutic Guidelines](#)
 - Pharmacists check on all prescription orders, and
 - Collaborative midwifery partnerships with rostered/responsible/on-call medical officer.
- > Complete an assessment, including a medication history, prior to prescribing and clearly document actions and rationale in medical record and/or SA Pregnancy Record.
- > Ensure that processes for community and hospital pharmacy, accessing medication/dispensing records, are aligned and supported by collaborative inter and intra professional partnerships.
- > Outpatient scripts provided by the endorsed prescribing midwife must be for medicines listed as a Midwife Item on the [PBS](#).
- > Recognise that where medications are prescribed on a non-PBS prescription that this will have cost implications for the woman and her family, and that the woman must be provided with information about the available options.
- > Outpatient scripts must not be dispensed by the prescribing midwife, unless specified under an approved LHN Standing Medication Order.
- > Endorsed midwifery prescribers must prescribe medicines that are consistent with the midwifery profession's practice, as stated in the [NMBA Consumer Information Sheet](#).
- > Midwifery prescribers must partner with the responsible/rostered medical officer around the ordering of diagnostics (including routine screening) and planning of care to ensure that primary and other care providers are well informed and included in the care provided and planned. SA Health stipulates midwives must not diagnose in isolation.
- > Midwifery prescribers must follow the [Initiating Pathology Requests Policy](#).
- > Where an LHN has authorised midwifery initiated clinical investigations to enhance service flow and provide a woman-centred service, the LHN must ensure that a local procedure/protocol is developed to support the process. For midwife initiated clinical investigation:

- The woman must be a public patient for a midwife initiated clinical investigation
 - All midwife-initiated investigations must be referred to a SA Health provider (including SA Pathology and SA Medical Imaging), and
 - No Medicare claim can be made for these investigations, the cost associated with undertaking the investigation is approved by the LHN prior to the investigation taking place.
- > LHNs must provide women and their families with information about the prescribed medicines to enable the woman to make an informed decision, including (but not limited to):
- Possible adverse effects and actions to be taken in response to an adverse effect.
 - The cost of the medication, including any out-of-pocket expense and any difference between generic and brand name drugs, for the consumer's decision making around, choosing, and complying with treatment.

Appendix 2: Compliance Indicators Mandatory Instruction

The following reporting obligations must be complied with to meet the requirements of this policy:

Indication	Description
Midwives prescribing in a SA Health facility	Number of midwives prescribing across the LHNs must be reported via SA Health Midwifery Leadership Advisory Council
Credentialing Committees in LHNs have increasing number of midwives applying to prescribe	Must report through to SA Health Midwifery Leadership Advisory Council
Audits of prescribing midwife	Must perform annual LHN audit reports on 80% of endorsed midwives in LHN
Satisfaction survey	Must perform a satisfaction survey for improved professional collaboration, scope of practice and understanding of midwifery prescribing.