



18<sup>th</sup> April 2017

Attention: Federal Health Minister Greg Hunt – [minister.hunt@health.gov.au](mailto:minister.hunt@health.gov.au)  
QLD Health Minister Cameron Dick - [health@ministerial.qld.gov.au](mailto:health@ministerial.qld.gov.au)  
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SA Health Minister Jack Snelling – [healthministerforhealth@sa.gov.au](mailto:healthministerforhealth@sa.gov.au)  
QLD Strategic Policy Unit – [strategicpolicy@health.qld.gov.au](mailto:strategicpolicy@health.qld.gov.au)

Re: National Framework for Maternity Services

Dear Health Ministers and the QLD Strategic Policy Unit,

Our organisations have decided to respond collectively, in addition to our individual organisational submissions, to the draft of the National Framework for Maternity Services. We would like to draw attention to the flawed and inadequate processes that have been applied to develop the draft that is

currently out for public consultation. As a result, we believe that it has delivered a Framework that lacks = direction, meaning and utility.

Our understanding is that Council of Australian Governments Health Council (COAG Health) tasked Australian Health Minister's Advisory Council (AHMAC) with developing an enduring framework for maternity services. This was then delegated to the Community Care and Population Health Principal Committee (CCPHPC) who created the Maternity Care Policy Working Group (MCPWG). The key failures of this process have been:

- The exclusion of the evaluation of the outcomes of the National Maternity Services Plan (NMSP). It is difficult to develop any new plan or framework without understanding the strengths and weakness, successes and failures of the previous Plan.
- The lack of true and meaningful collaboration with consumers, obstetricians, midwives, general practitioners, Aboriginal and Torres Strait Islander organisations and representatives, and other relevant stakeholders.
- Lack of transparency with regards to process of the development of the Framework. The Terms of Reference of the MCPWG has not been published and made public.
- The Scoping Paper and Project Plan developed by the MCPWG that were provided to Deloitte to inform consultation have not yet been published.
- Funding mechanisms and models of care were out of scope for Deloitte.
- Rural and remote women and clinicians did not have the opportunity to engage in this process and this is reflective in the framework draft.

Deloitte facilitated two hour consultations in Capital cities around Australia and in Cairns which excluded many women and leading clinicians as they were not invited or made aware that these sessions were taking place. This was echoed in the Deloitte consultation report, as the timeline provided for the development of the Framework was unrealistic. As a result the Framework is limited and unhelpful and will not drive quality in maternity services into the future.

The development of this framework should be discontinued or postponed until a consultative and meaningful process can be implemented. An advisory group of maternity consumer representatives, obstetricians, midwives, general practitioners, Aboriginal organisations and other identified key stakeholders should be created in each jurisdiction of Australia. A committee, similar to MCPWG, should be implemented to create a framework that is able to meet the needs of women and enable States and Territories to have a clear direction and shared goals to work towards. Another option would be reviewing and revising the NMSP rather than reinventing the wheel with a new framework.

We look forward to a response prior to the next COAG Health Council meeting.

Yours sincerely,

Australian College of Midwives  
Congress of Aboriginal and Torres Strait Islander Nurses and Midwives  
Maternity Choices Australia  
Midwifery and Maternity Provider Organisation Australia  
Sorooptimist International Moreton North Inc.  
Safe Motherhood For All  
My Midwives Australia

Still Aware  
Mothers and Babies Australia

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