AIMS For a better birth...

Better midwifery regulation

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Katherine Hales reports on the progress of the campaign #Savethemidwife

Over the last year, members of the Association of Radical Midwives (ARM) have expressed the concerns felt by many midwives about the loss of the Midwives Rules and statutory supervision. These protected the midwife's obligation to her duty of care to attend a woman in childbirth, even when her situation put her outside standard NHS Guidelines. The system of statutory supervision allowed a midwife to engage with her supervisor and a woman in her care to devise a safe and satisfactory care plan to all concerned.

We were also aware of the loss of the statutory midwifery committee which advised the NMC, and a dearth of midwifery leadership in all areas including education. We were told that we were to be 'led' by the chief nurse for England, Julia Cummings.

We proposed to launch our campaign at our study day in Wigan, in March 2017, however, in December, just before Christmas 2016, Independent Midwives were informed by the NMC at short notice that they would be unable to practice as self-employed midwives as the NMC stated that their insurance was not sufficient to indemnify them. The NMC refused to give any advice as to what would constitute sufficient indemnity, and the ruling seemed to be rushed and ill considered. This would mean that women who were expecting to be cared for by their midwives would have to seek care elsewhere, or be forced to birth alone, and the midwives concerned would lose their livelihood. This led to the organising of an urgent meeting at the HQ of the RCM in London by many interested midwives and lay people including Beverley Beech, AIMS Chair, to accelerate the campaign and devise a strategy. We sought expressions of interest and ideas from the meeting held in Wigan in March and hope to have an action plan after our next meeting on 20 May 2017 in Peterborough.

On the 5 May 2017, around 200 mothers, fathers, babies, midwives, birth activists and supporters gathered outside the offices of NMC at 23 Portland Place London. Many travelled a considerable distance to support this vital campaign. Speeches were made by Becky Reed, midwife formerly of the Albany Midwifery Practice, who told us about her long ordeal at the hands of the NMC. It took five years for her to receive a 'no case to answer' result. Ruth Weston (birth campaigner and AIMS member), Paula Cleary of Birthplace Matters and Michelle Quashie also spoke. There was a range of banners, songs and chants some of which can be seen on the #savethemidwife Facebook page. Deb Hughes was in an authentic and eye-catching 'Call the Midwife' uniform! Caroline Flint, who suggested and organised the demonstration, was also with us. A number of photographers appeared and there was a report in the Daily Telegraph. Please let us know if you heard or saw any other reports.

We are able to report that Rachel Dufton, NMC communications officer, offered to meet with a small group of us. Ruth Weston, Paula Cleary and Beverley Beech represented the lay voice, while Deb Hughes and Katherine Hales (ARM) represented midwives. We met with CEO Jackie Smith, Rachel Dufton, and Emma Broadbent (Director of Registrations.) We had a 45 minute discussion with all present raising important points of concern to midwives and parents. We managed to cover quite a lot in the relatively short time, including the loss of the Midwives Rules and statutory supervision; the lack of midwifery leadership and erosion of midwife autonomy; the importance of a strong midwifery profession in protecting women's rights in childbirth and informed choice (amply demonstrated by international research), lack of appropriate standards for education and practice, the potential for home birth to be less accessible as NHS trusts' contractual power over their staff overrides 'duty of care' to attend a birth, the place of UK midwifery as a global gold standard, and independent midwifery and the decisions taken recently by the NMC which seem to have been badly considered and implemented from a lack of knowledge and understanding of the issues. All present reported disappointment with the lack of a considered or timely response to all petitioners whether midwives or lay people.

Jackie Smith spoke for the NMC and stressed several times that the NMC's role was to protect public safety and was not a voice for midwives. We are, of course, aware of this but the inattention of the NMC to questions and concerns from lay people led to the conclusion that they are not fulfilling their role in protecting the public either. Jackie reminded us that we have a new midwifery panel, a midwife advisor and Professor Mary Renfrew is working on educational standards. She stated that statutory supervision was ended by the DOH not the NMC. Having read the minutes of the meeting at which the decision was made we felt that the NMC had made no attempt to counter the DOH view. We were interested in how much actual influence the midwifery panel and advisor may actually have and how and by whom they were appointed.

Jackie Smith undertook to explore the possibility of undoing the statement about midwives being unable to attend friends or family, but would not comment on the independent midwife situation; we later heard that IMUK has obtained a judicial review and their case is going ahead.

We intend to write to thank Jackie Smith and the NMC for meeting with us and will monitor their

undertaking to engage more appropriately with users and midwives and will request a follow up meeting in early autumn.

Katherine Hales

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