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I hope you and your whānau managed to get time together on June 24 to celebrate our first national holiday to mark Matariki.

In recognition of this special time, Te Tatau o te Whare Kahu | Midwifery Council would like to acknowledge and remember all the midwives who have preceded us as well as tautoko all of you who work today to care for whānau during their pregnancy and birth experience. I also acknowledge those midwives who work in other areas of midwifery – like education, regulation, academia, etc.

Like many of you, staff at the Secretariat have had to juggle work demands with the effect of winter ailments, family commitments and work obligations over the past few weeks. Despite this, we have managed to cope with the increased workload.

Work continues with the annual audit, and we also have been recruiting for a new Senior Advisor Midwifery Education. Dr Ruth Martis resigned from this portfolio last month and I would like to thank her for the knowledge, energy and professionalism she brought to this role over the past year.

Thank you for your mahi as you support whānau throughout the motu on their pregnancy and birth journeys.

Dr Susan Calvert

Tumu Whakahaere me te Pouroki | Chief Executive and Registrar

Midwifery Workforce Survey 2022

The annual Midwifery Workforce Survey report is now available on our [website](#). This publication provides feedback to the profession and has been shared with Te Whatu Ora | Health New Zealand.

This year, additional analysis was undertaken and narrative provided in relation to significant challenges facing midwifery in Aotearoa New Zealand. Some of the issues include the workforce shortage, reasons midwives give for not practising, and diversity within midwifery. Subsequent reports will build on this analysis.

The Workforce Survey information is collected from all midwives who apply for a practising certificate. Most responses were collected in February and March 2022. Midwives could also complete a survey if they decided not to renew their practising certificate and analysis of this additional data is also in the report.

Midwifery Workforce Changes

3085 midwives held a practising certificate at the time of the survey - 198 less than at the same time last year. The total number of midwives with practising certificates had increased each year since 2016, but has now returned to almost the same level as in 2016.

Parental leave was the most common reason for midwives returning to practice and for those currently not practising while still holding a current practising certificate.

Update on

Te Tatau o te Whare Kahu ki Hine Pae Ora | Aotearoa Midwifery Project

Te Tatau o te Whare Kahu | Midwifery Council Board has received the analysis of the feedback from the first round of consultation on the draft Scope of Practice statement.

Ngā mihi maioha to all the midwives who took time and effort to send submissions to the Council.

The Board examined the feedback report and sought legal advice. After lengthy discussion, the Board unanimously agreed to make a few adjustments to the Scope statement and then enter a further round of consultation with the sector. We anticipate that this will occur in August 2022.

The Council members of Te Tatau o te Whare Kahu have, therefore, committed to leading and providing opportunities for further discussion with midwives to discuss a range of issues that have been raised over the course of this part of the project.

We will make sure to let you know once the dates are finalised and look forward to seeing many of you taking part.

Meet the team

The operational arm of Te Tatau o te Whare Kahu | Midwifery Council is the Secretariat. Primarily located in Wellington, the staff carry out all the day to day functions of the Council. We will be introducing you to members of the operations team – in this issue, we would like you to meet the Senior Advisor, Midwifery Regulation, Nicky Jackson.

Kia ora, I have worked within the secretariat for the past six years - and moved to work full time two years ago. My background as a midwife includes working as an LMC, working as core staff, working in management at a DHB and as the Maternity Quality Safety Programme (MQSP) facilitator.

I work with a great team of people here at Te Tatau o te Whare Kahu | Midwifery Council. Together they provide the administration for all the different areas of regulation; our registration process for both New Zealand graduates and Internationally Qualified Midwives, Programmes for those returning to practice (after 3 years) and returning to New Zealand and those from overseas. I also am part of the team that considers complaints and notifications about midwives' practice.

I live in Wellington and have four children with only one still left at school, and a very supportive partner. My current focus is Adventure Racing - so I am busy training for this with the next race in the Hawkes Bay.



Nicky Jackson,

Senior Advisor – Midwifery Regulation

Continuing Professional Development – Recertification Programme

All midwives make an annual declaration which includes stating that they are engaged in the Te Tatau o te Whare Kahu | Council's Recertification Programme.

Engagement in the Programme is a professional responsibility and a way of demonstrating continuing competence to practise.

All midwives are expected to identify their learning needs and develop a professional development plan which will address

where you may need to update knowledge or skills, attitudes and values within the Midwifery Scope of Practice.

This is to make sure you are giving evidence-informed care to keep women and their babies safe as well as meeting all the Competencies for Entry to the Register, specifically Competency Four which states that the midwife upholds professional midwifery standards and uses professional judgment as a reflective and critical practitioner when providing midwifery care.



Te Tatau o te Whare Kahu | Midwifery Council Board

Members of the Board pictured in Te Whanganui-a-Tara | Wellington in July.

From left: Chris Mallon, Ngarangi Prichard (Co-Chair Tangata Whenua), Kerry Adams (Co-Chair Tangata Tiriti), Mahia Winder, Beatrice Latham, Melanie Tarrant, Jude Cottrell.

Understanding the effects of anticonvulsant medicines on unborn babies

In July, Te Tatau o te Whare Kahu | Midwifery Council received the report (Case 19HDC00773) from the Health and Disability Commissioner (HDC) concerning a woman who was taking Sodium Valporate (Epilim) when she became pregnant.

Her complaint arose because of the lack of information she received from the health professionals involved in her care both before and during her pregnancy.

The HDC found a number of failings with the process from the DHB and the mental health care team regarding accessibility of information given to the woman.

The midwife was also found have breached Right 4(2) of the [Code](#) for retrospectively amending the woman's antenatal records without stating the amendments were retrospective.

Retrospective documentation

The Commissioner has commented on retrospective documentation within the report.

The Council expects that any retrospective notes should be clearly stated as such. This is outlined in the Council's Be Safe paper '[Documentation and Record Keeping](#)'.

The Council also expects midwives to know when women or their babies are at increased risk of effects from medicines and when increased doses of folic acid are required.

All midwives need to understand potential harmful effects of anticonvulsant medicines on unborn babies so that they can make timely referrals if needed and provide women and their whānau with information in a way they can understand.

This aligns particularly with the following Competencies for Entry to the Register of Midwives:

Competency One

The midwife works in partnership with the woman/ wāhine

throughout the maternity experience.

1.9 communicates effectively with the woman/wāhine and her family/whānau as defined by the woman

1.10 provides up to date information and supports the woman/wāhine with informed decision-making

Competency Two

The midwife applies comprehensive theoretical and scientific knowledge with the affective and technical skills needed to provide effective and safe midwifery care.

2.3 assesses the health and well-being of the woman/wāhine and her baby/tamaiti throughout pregnancy, recognising any condition which necessitates consultation with, or referral to, another midwife, medical practitioner or other health professional

2.13 demonstrates the ability to prescribe, supply and administer medicine, vaccines and immunoglobulins safely and appropriately within the midwife's scope of practice and the relevant legislation

Competency Four

The midwife upholds professional midwifery standards and uses professional judgement as a reflective and critical practitioner when providing midwifery care.

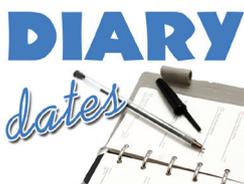
4.4 recognises strengths and limitations in skill, knowledge and experience, and shares or seeks counsel, consults with, or refers to, a relevant resource, other midwives, or other health practitioners

The Council has been part of the Health Quality and Safety Commission and [Accident Compensation Corporation](#) work on raising awareness of the risks of taking medication during pregnancy. This led to the development of resources for pregnant women and health professionals. Find out more at: www.facsnz.com/news

Cultural audit

At its meeting in June, the Council decided to commission a full cultural audit of both the Board and the Secretariat to identify the best way to carry out the work of the Council.

The Council is currently in the process of engaging consultants to complete this work.



- 31 August 2022 Finance Audit and Risk Management Committee
- 8 September 2022 the Council meets

Abortion legislation

Please remember that Abortion Legislation education is a requirement for all midwives this recertification period.

The course "[Introduction to the Abortion Legislation and Midwifery Roles and Responsibilities](#)" is now available for midwives to complete.

Remember to make sure to update your MyMCANZ portal once education or activities are completed.