

Ms Jackie Smith
Chief Executive
Nursing and Midwifery Council
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Birthrights
c/o Ramon Lee and Partners
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By email

13 January 2017
Our ref: NMC/RS/0117

Dear Ms Smith

I am writing to you in my capacity as chief executive of Birthrights, the human rights in childbirth charity, to express my concern about your recent decision regarding the adequacy of indemnity insurance for independent midwives (as arranged through IMUK). I seek your clarification and reassurance that the NMC understands the full implications of the decision for pregnant women and will take urgent steps to ensure that they remain able to access care that they have chosen.

Over the past week we have been contacted by a number of very anxious pregnant women seeking our advice. They have informed us that the independent midwife they have booked and paid to provide their maternity care has been “prevented from attending their birth” due to your decision about the adequacy of IMUK’s insurance arrangements.

At a late stage of pregnancy, and having built a relationship with their midwife through the antenatal period (and in some cases in previous pregnancies), they are faced with uncertainty and distress that stems directly from the NMC’s decision.

While we are aware that some women may be able to transfer to local NHS home birth services, we are concerned about the safety implications of this. Local NHS home birth teams will not have antenatal records relating to women who book later in pregnancy and there will be a very limited opportunity for a named midwife to build a relationship. In some areas there are limited, unreliable or no home birth services at all, which may have prompted the woman to use the



services of an independent midwife. Furthermore, many NHS home birth services are unwilling to support women who are making an informed choice to birth at home outside of guidelines. In these cases we believe that women will be unable to give birth at home with appropriate clinical care.

Many women choose the care of an independent midwife because they are unwilling to access NHS services, often because of previous traumatic experiences. Without the support of their chosen independent midwife, women have already told us that they feel their only option will be to birth without any medical or midwifery assistance. We hope that you will share our urgent concern about the avoidable harm that could come to women and babies in this situation.

The NMC has a key role to play in protecting public safety, yet this decision directly jeopardises the health and safety of the women it is supposed to safeguard. Beyond the very real physical health implications of this decision, it is causing emotional trauma to women and their families at an intensely vulnerable time. To date, it appears that the NMC has shown no concern for the physical and mental wellbeing of pregnant women who have booked with independent midwives.

You announced your final decision only three working days before Christmas and gave midwives and women only three weeks to arrange alternative care over the holiday period. You had been considering this decision for a long time so we are at a loss to understand why you felt it necessary to impose such a tight timescale, particularly in light of the risks to women's safety.

Birthrights understands that you have informed independent midwives that they cannot support women they have been caring for at their births in the capacity of a doula or friend. We do not believe there can be any reasonable rationale for this: independent midwives regularly support women at births while NHS midwives provide the midwifery care. This is normal practice when women transfer to hospital and has never been questioned by the NMC in the past. You are effectively denying women the emotional support of a person whom they trust in circumstances where you have forced them to accept care they would not have chosen. The threat of disciplinary proceedings against independent midwives in these circumstances is arbitrary and capricious.

We are also informed that the NMC has not made any attempt to inform midwives or the public as to what it considers to be adequate insurance. Without this information it is impossible for midwives and women to know what is adequate and make plans for their lives accordingly.

Overall, your actions appear designed to cause maximum disruption and damage to independent midwives and the women they care for. We do not believe that these are the actions of a responsible regulator.


We urge you to remedy the damage caused to date by taking the following urgent steps:



1. Guarantee that all women who are currently booked with independent midwives using the IMUK insurance scheme will be able to continue to access their services for the antenatal, intrapartum and postpartum period.
2. Reassure Birthrights, IMUK and the women who have already engaged the services of independent midwives that the midwives caring for them will not face disciplinary action for fulfilling their midwifery role and their contract with women who have booked their services.
3. Urgently make a public recommendation on what constitutes adequate insurance. This recommendation should be clear and explicit and provide sufficient information to independent midwives to enable them to take steps to secure adequate insurance.

I look forward to your urgent response to my concerns.

Kind regards,



Rebecca Schiller
CEO
Birthrights

