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MICHAEL JOHN ADAMS, LL.B.

6th September, 1979.

The Secretary,  
The New Zealand Home Birth Association,  
P.O. Box 7093,  
Auckland 1.

Dear Madam,

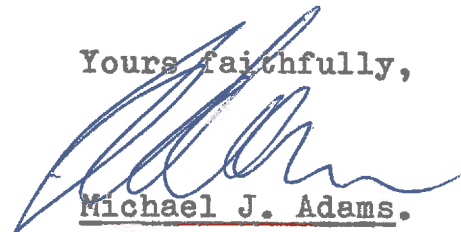
As requested I have investigated the relative roles of the Health Department and a domiciliary midwife. The relationship of the one with the other is set out in the Nurses Act 1971 and the Obstetric Regulations 1975.

Section 56 of the Nurses Act requires the local Medical Officer of Health to supervise all midwives in his area not employed by any hospital board. The same section empowers the Medical Officer of Health to suspend a midwife where such a suspension appears to him to be necessary to prevent the spread of infection. It is significant that this is the sole ground accorded him - to suspend any midwife - and in my view the supervision referred to earlier is merely an administrative matter to ensure that midwives comply with the requirements of the Obstetric Regulations. The supervision does not refer to the general running of the practice nor to decisions made by a midwife regarding any woman. Indeed Section 52 of the Nurses Act requires a medical practitioner to take responsibility for all "patients" of the domiciliary midwives, and any professional decisions made in the course of obstetric nursing are in the last instance to be made by the medical practitioner in question and not the Health Department.

In any event, the suspension to prevent the spread of infection referred to earlier is a temporary suspension only and must be lifted once the Medical Officer of Health considers the risk of the spread of infection to have passed.

The midwives are of course also subject to the same general disciplinary measures as the nurses. These arise first out of professional misconduct arising from malpractice or negligence and secondly from any mental or physical disability causing a nurse to be unable to continue her practice satisfactorily.

Yours faithfully,



Michael J. Adams.