

4 March 2024

Feedback on Queensland Health's Draft Termination of Pregnancy Action Plan

AMA Queensland thanks Queensland Health for requesting feedback on its Draft Termination of Pregnancy Action Plan (the 'Draft'). Given the short timeframe of 5 business days for responses, however, the below dot-point feedback is based on a preliminary review of the Draft only and does not represent a full and considered examination of the various matters canvassed.

AMA Queensland respectfully requests Queensland Health provide an opportunity for ongoing input with appropriate timeframes for consultation as future iterations of the Draft are developed and progressed.

- Doctors continue to raise the urgent need for Queensland Health to take a **comprehensive approach to the provision of termination of pregnancy (ToP) services**. At present, most ToP services are delivered in an ad-hoc manner at the discretion of individual hospitals.

It is imperative that **all Queensland Health facilities be required to offer ToP services or, as a minimum, associated pathways** consistent with Recommendation 15 of the Australian Senate Committee Report 'Ending the postcode lottery: Addressing barriers to sexual, maternity and reproductive healthcare in Australia'.

- **Education and training requirements** for practitioners providing ToP services, including nurses and midwives, must be the same as that required for current providers, including medical practitioners. Any expansions in scope of practice purportedly justified on the basis of increasing access to ToP (and any other health service) must not come at the expense of patient safety.
- Practitioners must also be held to **the same standards and accountability regardless of clinical background or practice setting**. All **patients must be safety-netted** with clinician accountability for follow-up and provision of a 24/7 phone help line for patients experiencing complications or distress.
- Whilst AMA Queensland is supportive of the development of agreed **pathways and models of care**, including networked and telehealth supported services, Queensland Health must ensure they are dependent on an assessment of the individual patient's level of complexity. Certain clinical circumstances necessitate face-to-face consultations and the provision of holistic care that cannot be provided in certain health settings.

Doctors continue to report frustration at the siloed approach taken by Queensland Health in expanding various practitioner scopes of practices for particular medical conditions as it fails to **recognise patient complexity, comorbidities and best practice standards**. Put simply, patients do not present in neat packages with single conditions, including in ToP situations.

When doctors provide ToP services, it is an **invaluable opportunity to discuss pregnancy choice and contraception and screen for other important health issues** including sexually transmitted infections, cervical cancer and domestic and family violence.

- AMA Queensland requests Queensland Health provide more information about its proposed correspondence to the Federal Government seeking **associated ToP MBS items** as set out in the Draft. Such information must include the proposed model and practical implementation details.