MIDWIVES AND PHARMACISTS: Collaborative roles and responsibilities

It is well recognised that collaboration between health professionals is key to quality care. Knowledge of - and respect for - others’ contributions, scopes of practice, good communication and working well together are all necessary for good quality care.

This statement summarises key aspects of midwifery and pharmacist scopes that the respective health professionals need to understand about each other in order to optimise interprofessional relationships and patient care. We have included aspects of practice about which we frequently receive queries.

A useful way for a newly registered midwife, or someone new to an area, to initiate an effective working relationship could be by introducing themselves to the local pharmacy team. Fostering and maintaining collegial, professional working relationships between midwives and pharmacists leads to the best outcomes for patients.

Pharmacist scope of practice

Pharmacists practice in a variety of settings and can provide midwives, the women under midwifery care and her family with services such as;

- medicines information and research
- evidence-based advice and recommendations
- medicine supply and management
- drug therapy monitoring and counselling about medicines and medicine related health issues
- health screening activities and administration of medicines including vaccinations.

Pharmacists have the knowledge, skills and expertise to take responsibility for the management and utilisation of medicines. If in doubt about medicine combinations, interactions, dosages etc, pharmacists are trained to help.

Pharmacist Prescriber Scope of Practice

In addition to the Pharmacist scope of practice, Pharmacist Prescribers:
- are authorised to prescribe as designated prescribers
- have specialised clinical, pharmacological and pharmaceutical knowledge, skills and understanding relevant to their area of prescribing practice
- work in a collaborative environment with other health professionals
- while they are not the primary diagnostician, they can initiate or modify medicine therapy for a patient in their care.

Midwifery scope of practice

As authorised prescribers, the Medicines Amendment Regulations 2011 allows midwives to prescribe for women and their newborn(s) under their care, in accordance with their scope of practice as defined by the Midwifery Council. Midwives have the knowledge, skills and expertise to provide care to women during pregnancy, labour and birth and in the postnatal period.

A midwife’s scope of practice directs her to:
- work in partnership with women, on her own professional responsibility
- give women the necessary support, care and advice during pregnancy, labour and the postpartum period for up to six weeks
- to facilitate births and to provide care for the newborn
Midwives also provide medicines that support the woman’s preparedness for pregnancy e.g. folic acid or iron supplementation. Midwifery prescribing of controlled drugs (as per Schedule 1C of the Misuse of Drugs Regulations 1977) relates only to the intrapartum period.

**Midwives can manage family or friends who are their patients within their midwifery scope**

The Midwifery Council Code of Conduct reminds midwives to seek support of their midwifery colleagues if they are providing midwifery care for a friend or family member as a client. In these situations, prescribing is ethical and professional if it remains within the midwifery scope of practice. For example, a midwife is permitted to provide antenatal services to a member of her extended family, as a client.

**Midwives and pharmacists work together in a collegial and professional manner**

Midwives must make sure their prescriptions meet all legal requirements and that they comply with professional requests from pharmacists in a timely manner to ensure legislative and public safety needs are met.

**Pharmacists concerned about a prescription**

Pharmacists will dispense prescriptions ‘on their face’ and accept that what is prescribed is legitimate, unless there is reason to believe that a prescription does not comply with legal requirements.

If a pharmacist is concerned that a prescription is possibly outside the midwifery scope of practice, or if there are clinical concerns about the prescription, they will discuss this with the midwife in the first instance.

If a midwife cannot be contacted, pharmacists must assess the urgency of the prescription and use professional judgement to determine the best course of action. Registration details of a midwife can be checked on the Midwifery Council website and the Midwifery Council can be contacted during work hours for queries relating to scope or registration.

Effective communication between all parties - which is timely, accurate, complete and unambiguous - reduces errors and results in improved patient safety.

Today, healthcare is increasingly complex and diverse. Improving collaboration and communication among healthcare professionals will support the safe delivery of patient care.

For more information visit:

[www.midwiferycouncil.health.nz](http://www.midwiferycouncil.health.nz)
[www.pharmacypcouncil.org.nz](http://www.pharmacypcouncil.org.nz)

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