

**Productivity Commission – Submission in response to Early Childhood Development Workforce  
Draft Report (June 2011)**

**Introduction**

Maternal and Child Health (MCH) services in Victoria's Wyndham City are managed under an Early Years framework that focuses on providing quality services for families with children aged from birth to school age. Wyndham's direct management structure for MCH services consists of two qualified and experienced MCH nurses with a combination of over 40 years of service.

Wyndham is situated in Melbourne's West and is the third fastest growing local government area in Australia. Wyndham's current population of 158,000 is expected to exceed 245,000 by 2021.

**Overview**

Our submission is limited to Chapter 12 of the *Early Childhood Development Draft Report* and the *Child Health Workforce*

We are particularly concerned with recommendations 12.3 and 12.2 of the Draft Report regarding removal of midwifery as a qualification prerequisite for MCH nurses, and questioning the value of scholarships for MCH programs of study.

**Draft Recommendation 12.3**

We are strongly opposed to the removal of midwifery as a qualification prerequisite for MCH nurses as we believe that the midwifery qualification provides a sound knowledge base and skills for the ongoing care of the mother and child after birth.

MCH nurses provide services that commence soon after discharge from the birth place of the child. In some cases, the services commence prior to discharge, for example where a baby has been admitted to Special Care Nursery. The nurse's midwifery skills provide a sound understanding of the birthing and postnatal period. These skills assist with developing an ongoing service plan for the family.

As coordinators of MCH services, we respond to many calls from hospital maternity departments and neonatal nurseries regarding follow up for clients where issues have been identified while in hospital. One such example was a call from a midwife regarding a mother who was both physically and mentally traumatised following the difficult birth of twins. One twin died at birth while the other remained in Special Care Nursery. The mother was identified as being at risk of developing postnatal depression and possible rejection of the surviving twin. The nurse who cared for the mother and baby used her midwifery skills extensively to assist the mother to understand and debrief about her birthing experience and subsequently assist her with bonding to the surviving twin.

Other examples of calls received by nurses include queries regarding the establishment of lactation, neonatal screening tests and the physical and emotional health of the mother. Midwifery skills and knowledge are essential to plan for the ongoing assessment and care of the mother and baby.

## **Draft Recommendation 12.2**

We strongly support the ongoing provision of DEECD and local government scholarships for MCH postgraduate programs of study.

Wyndham has experienced a rapid growth in births over the past 6 years and trends indicate that this is likely to continue. To ensure an ongoing workforce of MCH nurses, Wyndham currently provides up to three scholarships per year to assist students financially to achieve their MCH nursing qualification. To date, 12 scholarships have been awarded to students since 2003. Of these, 11 have accepted permanent employment in Wyndham. Scholarships have unquestionably been a successful recruitment strategy in Wyndham with resulting high nurse retention rates.

Scholarship recipients are predominately local residents who choose to work in Wyndham. Many also continue with their midwifery practice while working as a MCH nurse as they believe that each practice compliments the other. Scholarship students obtain their clinical placement in Wyndham while completing their training resulting in a high familiarity with local systems and practices. This assists to develop the students' confident and competence prior to commencing work in Wyndham.

### **Consultation**

We are concerned at the limited consultation undertaken by the Productivity Commission with Victorian nurses. Our service is widely considered the best in Australia and has many strengths. We are surprised that the Commission has not held any public sittings with Victorian MCH nurses. To help the Commission understand the many strengths of the Victorian MCH Framework we would be grateful if the Commission would meet with us and other MCH nursing colleagues.

### **Conclusion**

We thank the Commission for considering our comments.

We hope that the far reaching strengths of the Victorian MCH nursing service can be adopted by other states and that recommendations are not imposed that reduce and diminish the quality of the Victorian MCH nursing service.

Prepared by Sue Christo and Pauline Petschel, Maternal and Child Health coordinators on behalf of Wyndham City.