

# Improving Maternity Services: Working together across Western Australia

A Policy Framework



Delivering a Healthy WA



## Message from the Minister



It is with great pleasure that I present to you *Improving Maternity Services: Working Together Across Western Australia - A Policy Framework*. Improving the way maternity care is delivered is an important priority for the Government of Western Australia. We are committed to developing services in collaboration with the community. It may appear to some that this policy has been a long time in the making but we wanted to ensure that this policy truly reflects the needs and aspirations of the Western Australian community and focuses adequate attention on those groups within our community who most need our help.

The policy framework is a sound example of this Government's commitment to consulting the community on the future directions for our essential services. The statewide consultation, which commenced in November 2005, included special events, media coverage, public meetings, one on one discussions, focus groups and a telephone survey. From Kununurra to Esperance, from Carnarvon to Warburton, community members and health care professionals were encouraged to share their views on maternity care and what was important to them.

Pregnancy, childbirth and early parenting are important and significant times in a family's life. Most families anticipate pregnancy and childbirth to be a healthy and joyful process. However, if things go wrong they can have disastrous consequences for families if access to specialist care is not within easy reach. For this reason, many women in Western Australia have to leave their community to give birth in a place that is within easy reach of specialist services. This places a great burden on many women and their families. This Government acknowledges its role in ensuring the availability of adequate housing, accommodation and transport services to support these women and their families and is exploring innovative ways to improve this vital infrastructure.

This policy is focused on women and their babies and will see a move to more accessible and safe services for all women across Western Australia. It places a high priority on improving outcomes for Aboriginal women and their babies. It moves away from a hospital based, medically focused model of care toward community based primary care services that are closer to people's homes. Better information about pregnancy and childbirth and a focus on developing a workforce that makes best use of skills rather than being limited by traditional professional boundaries are key themes that I believe will invigorate and strengthen maternity care services in Western Australia for many years to come.

A handwritten signature in black ink, appearing to read 'Jim McGinty', with a stylized flourish at the end.

Hon Jim McGinty  
Minister for Health

## Message from the Director General



This new Policy Framework has been developed over a long period of time and has included input from women and health professionals from all over the state. The Maternity Reference Group, whom I would like to thank personally, has assisted in the drafting of the policy. I would also like to acknowledge all the Area Health Service staff and community members who took the time to give us their views.

This policy is designed to offer guidance to all those involved in developing and delivering maternity care services. It seeks to improve outcomes for women and their babies by focusing on safety and improving options for pregnancy and childbirth. It reflects women's desire for their pregnancy, childbirth and post birth experience to be enriched and positive. The key themes of safety, continuity of care, information and communication arising from the consultation are clearly reflected in this framework in conjunction with objectives and strategies that will assist WA Health in the important task of implementing the framework.

Western Australia is one of the safest places in the world to give birth. It is important to maintain this level of safety and give choice to women in childbirth without high levels of intervention. To do this, requires the community and the health professionals to recognise that pregnancy and childbirth is a physiological process, which is normal for most women. Whilst in Western Australia we have very good health outcomes for most mothers and babies, there are some groups within our community where outcomes remain alarmingly poor. This is a particular concern within our Aboriginal community. The framework has placed improving outcomes for the Aboriginal community as its first priority.

A move toward primary care services for healthy women, with a focus on access to specialist services when required, will ensure that maternity services become more women-centred and sustainable. The models of maternity care presented in this framework acknowledge the important roles of each team member and focus on how best to use their skills, whilst acknowledging the need to be more flexible and creative in how we deliver services to women in rural and remote areas.

This Policy Framework will guide the development of maternity services over the next five years. It has been the result of one of the most comprehensive consultation processes ever undertaken by WA Health and I am confident that this new policy framework truly reflects the views of the Western Australian community and those health professionals who provide maternity care.

A handwritten signature in black ink, reading "Neale Fong". The signature is written in a cursive, flowing style.

Dr Neale Fong  
Director General

## Background

*Improving Maternity Services: Working Together across WA* provides a policy framework for maternity services over the next five years. It is the result of significant statewide consultation with the community and health professionals in Western Australia. The maternity care consultation was a three-stage process which commenced in November 2005. Stage one included consultation with health professionals and the Health Consumers' Council in the development of the initial discussion paper "Future Directions in Maternity Care". Stage two consisted of the release of the discussion paper to the public for comment. Stage three was the most comprehensive and included:

- Commissioning an independent review of the research literature on models of maternity care.
- Development of the draft policy "Improving Maternity Choices: Working Together Across WA" and its public release for comment.
- A comprehensive statewide consultation of the draft policy through focus groups with health professionals, community forums, Aboriginal forums and bush meetings, one on one meetings with key stakeholders, a statewide telephone survey (over 1500 women between the ages of 16 and 50), a telephone hotline, teleconferences and videoconferences.
- The convening of the Maternity Reference Group to assist in guiding the policy development.
- Development of the maternity consultation report.

The maternity services consultation, Maternity Reference Group, and past recommendations and reports on maternity care in WA have been paramount in setting a new direction in maternity care. WA Health recognises that good maternal and fetal outcomes depend upon the health of the mother prior to conception as well as excellence of care in the antenatal, birthing and postnatal period. Healthy outcomes for women and their babies are dependent upon healthy communities,

timely access to adequately resourced maternity facilities and appropriately skilled maternity care providers throughout pregnancy and beyond.

The policy framework draws together the evidence in regards to best practice, community expectations and aspirations, as well as the needs of the workforce who are instrumental in providing maternity care. Birth rates continue to rise in WA and our current workforce projections indicate that we cannot continue to organise services in the same way if we are to provide a quality maternity service in the future. The policy identifies fundamental changes to the current structure and culture of maternity services in WA. These changes have been identified to better reflect the needs of women, babies and their families.



**You told us that:**

- **Pregnancy and childbirth are normal physiological events.**
- **Safety for women and babies is paramount.**
- **Continuity of care is critical to quality services.**
- **Maternity care should be community based wherever possible.**
- **Disparities in health outcomes should be minimised.**

WA Health aims to develop and deliver maternal and newborn services that provide safe, integrated and effective care, and respond to the individual needs of women, their baby, and their family in a variety of settings.



## Seven goals of the framework

The policy framework incorporates seven main goals. These goals are supported by objectives and strategies that will assist policy makers and service providers in reaching these goals within your community.

### 1. Improve health outcomes for Aboriginal women and babies.

WA Health recognises that often the needs of some women, particularly Aboriginal women, are not being met by the current system. There is evidence to indicate that maternal and baby programs in general may not provide appropriate care and assistance to this community.

#### Objectives

- Improve the cultural appropriateness of mainstream maternity services for the Aboriginal population.
- Recognise Aboriginal cultural kinships as the basis of relationships, roles and responsibilities within Aboriginal communities.
- Establish new and support existing culturally appropriate educational programs and antenatal services for Aboriginal adolescents.
- Establish and develop sustainable Aboriginal women's and maternity programs in conjunction with local Aboriginal health partnerships to effectively address the risk factors associated with childbirth.
- Increase the recruitment and development of Aboriginal health workers and Aboriginal people employed in Community Health Services to provide culturally appropriate services and continuity of care for Aboriginal women and babies.
- Improve the partnership between Area Health Services and Aboriginal Community Controlled Health Organisations (ACCHOs).

- Increase opportunities for research and evaluation of maternal and baby programs and support local organisations to provide sustainable programs, achieve better outcomes, and promote evidence-based practice.

## 2. Improve the health and wellbeing of women and their unborn babies through better preconception and early pregnancy care.

Planning and preparation for pregnancy with an emphasis on good health and consistent support from professionals will benefit the woman, her unborn baby, and her family and empower women and their families to make choices which are safe and meet their needs.

### Objectives

- Encourage and empower all women of reproductive age to be as healthy as possible.
- Improve access to specific preconception, antenatal and specialist services for women with poor obstetric or medical histories, previous poor fetal or obstetric outcomes and for women with complications in early pregnancy.
- Increase awareness of the growing trends in obesity and the links with gestational diabetes and other complications throughout pregnancy. Improve early detection and evidence based management of obesity and diabetes both before and during pregnancy.

### 3. Improve women's experience of pregnancy.

Continuity of care should be emphasised and high quality consistent information given to allow informed decision making. Women have the right to choose their lead health professional in pregnancy and continuity of carer is paramount.

#### Objectives

- Improve the assessment of women's circumstances enabling early identification and better management of physical, social and psychological needs.
- Provide comprehensive pregnancy, childbirth and early parenting education programs.
- Improve linkages between primary, secondary and tertiary services in order to facilitate maternity services that are woman and family centred, locally accessible, safe, comprehensive and effective.



## 4. Improve women's experience of childbirth.

A team approach to care provision by all health professionals including midwives, GPs, obstetricians, paediatricians, physicians, Aboriginal health workers, child health nurses, and other health professions is a priority. It is essential that midwives and GPs are recognised as key providers of care for healthy women with low obstetric risk and their babies.

### Objectives

- Support women to choose how and where they give birth by providing high quality information and evidence based clinical advice, ensuring that the information is accessible.
- Increase the capacity for midwives to provide one-to-one care to women throughout pregnancy, labour and childbirth, facilitating greater individual support, and enabling continuity of carer.
- Improve the integration of maternity services, including midwifery, general practice, obstetric and neonatal services, enabling greater responsiveness to the needs of mothers and their newborn babies.



## 5. Improve the health and development of infants and address the needs of new parents.

A multidisciplinary and multi-agency approach should be developed and supported to consider the specific needs of women and their babies.

### Objectives

- Continue to support and develop integrated statewide neonatal services to facilitate greater responsiveness to the needs of sick babies and their parents.
- Better inform women of the benefits of breastfeeding whilst supporting mothers in their chosen mode of infant feeding.
- Increase opportunities for support from a multidisciplinary service for women who have, or are at risk of, postnatal depression and other mental illnesses.
- Increase support for women and their partners to make a confident and effective transition to parenthood in partnership with midwives, child health nurses, GPs and allied health professionals.

## 6. Improve safety and accountability in all maternity services.

Monitoring the safety and quality of maternity and newborn services is of paramount importance and allows service providers to continuously assess their performance. WA Health has a vigorous system for ensuring that safety and quality are embedded in all maternity services.

## Objectives

- Increase the opportunity for both the community and health professionals to be involved in the planning, development and provision of local maternity services.
- Strengthen and support patient safety for WA health services and our community through the Safety and Quality Investment for Reform (SQIRe) Clinical Practice Improvement Program.
- Reduce the rate of caesarean births performed prior to 39 completed weeks of gestation and support vaginal births after caesareans (VBAC) in hospitals.
- Implement the National Core Maternity Indicators across WA to better enable health services to identify areas of improvement and benchmark with other like services.

## 7. Improve the sustainability of the maternity care workforce and promote clinical leadership and collaboration.

A move toward more woman centred care in the community will allow midwives to fully utilise their skill base and attract non-practising midwives back into the workforce. Recognition of the vital role GPs and GP obstetricians play in the provision of maternity care needs to be supported by increasing the availability of clinical training positions and opportunities for maintaining and regularly updating their skills.

## Objectives

- Increase the availability of models of care that acknowledge the best use of skills rather than traditional professional boundaries.
- Establish and support the Women's and Newborns' Health Network to foster clinical leadership and bring all interested stakeholders together to plan and develop maternity care services in WA.

- Support and promote the Women's and Newborns' Health Network and the State Obstetrics Support Unit (SOSU) in improving safety and developing the maternity care workforce for a range of models of care.
- Recognise and support the role of the non government sector in providing advocacy, support and education to women and their families.



## Models of maternity care - a collaborative team approach

WA Health will encourage health professionals in maternity care to work collaboratively and in a multidisciplinary team to ensure the best possible maternity care is provided and meets the needs and requirements of the woman and her baby. WA Health aims to ensure that the skills, knowledge and attributes of the workforce will be maximised to provide a collaborative and multidisciplinary approach in maternity care. This collaborative approach to maternity care will assist women to move seamlessly through the levels of care required for the woman and her baby.

The framework presents several models of maternity care that have been shown through the research literature and practical experience to be safe and effective within certain contexts and are acceptable to the current maternity workforce. A move to increase community based maternity care with greater emphasis on continuity of both care and carer are reflected in the models. Area Health Services will discuss the availability and development of these appropriate models of maternity care in consultation with your community. The models for WA include:

- Shared care
- Midwifery models of care including:
  - Team midwifery care
  - Midwifery group practice  
(sometimes known as Caseload midwifery care)
- General Practice (GP) models of care
- Consultant led care

## Locations of maternity and newborn care

### ■ Family Birth Centre

A Family Birth Centre (FBC) is defined as a freestanding primary maternity unit, which provides 24-hour midwifery care for healthy women who anticipate a normal, uncomplicated or low risk pregnancy and birth. Women, their babies, and their partners return to home within 24 hours of birth and have follow up care from visiting midwives who provide continuing care at home.

### ■ Home

Small numbers of women in WA choose to birth at home. Women may birth at home with an accredited home birth practitioner. Currently in WA there is one publicly funded and accredited provider of home births, the Community Midwifery Program (CMP).

### ■ Hospital

Midwives, GPs, GP obstetricians and obstetricians, anaesthetists, paediatricians, and neonatologists provide hospital care. Some hospitals have well equipped birthing units supported by emergency theatre access in the event of any emergency which may occur during a birth. Some hospitals only provide emergency obstetric care, while others provide highly specialised services.

### ■ Integrated Primary Care Centres

WA Health is currently implementing integrated primary care services that will offer care for women who have a healthy and low risk pregnancy. This service will provide antenatal care, parent education and postnatal and newborn care but will not provide birth options. Women will usually still need to give birth in a hospital or FBC.

## Women's and Newborns' Health Network in Western Australia - collaborative healthcare planning for the whole community

A Health Network is a group of interested people and organisations including health professionals, patients, carers, consumers and others, coming together to talk, think, plan and develop health policy and services across the State.

Health Networks were established in 2006 as part of the reform of WA Health and cover major areas of health and illness such as cancer, mental health, child health, aged care, respiratory health and now women's and newborns' health.

They do this by:

- Planning services based on the needs of the community
- Developing innovative healthcare policy to meet the changing needs of the community
- Setting meaningful targets and monitoring outcomes for patients and services
- Developing protocols to ensure efficiency, effectiveness and safety across WA Health
- Providing opportunities to develop skills and knowledge, foster leadership and provide advice for future workforce planning
- Helping to set priorities on the use of resources across WA Health

Health Networks focus healthcare on patients and services rather than buildings and organisations and are an effective mechanism for stronger consumer and community participation in healthcare planning. Input from a variety of people and organisations across different healthcare areas, community sectors and levels, is essential to comprehensive planning for WA Health.

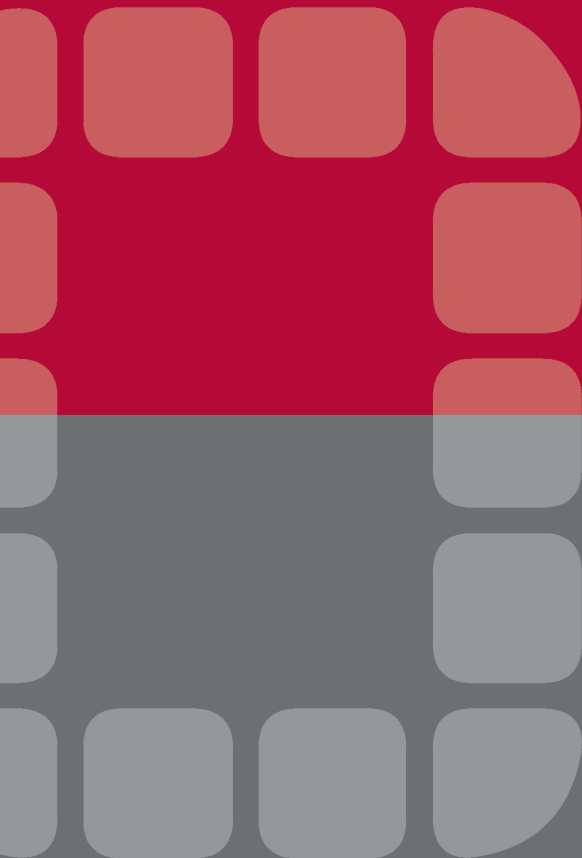
The membership of the Women's and Newborns' Health Network will include doctors, nurses and midwives, carers, consumers, other healthcare professionals, academics and a range of others, all bringing to the healthcare planning table a unique and valuable perspective.

The key strategic document which will inform this network is the policy framework document "Improving Maternity Services: Working together across Western Australia" and the lessons learnt from state-wide community and health professional consultation.

## How can people get involved?

If you would like to get involved with Health Networks, register your interest at our website [www.healthnetworks.health.wa.gov.au](http://www.healthnetworks.health.wa.gov.au) or by contacting the branch directly via email [healthpolicy@health.wa.gov.au](mailto:healthpolicy@health.wa.gov.au) or by calling (08) 9489 2800.





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