Attention; Ben Mc Lean

NAME; Mary Pekin MCH Nurse –

My submission contains NO material supplied in confidence and can be placed on the Commissioner's website.

My name is Mary Pekin and I have practised as a Maternal and Child Health Nurse in Victoria since December 1999.

I am working in Melbourne and have been employed by Monash City Council for 7 years and since then at the City Of Casey.

I am registered as a General Nurse and Midwife with the Australian Health Practitioner Regulation Authority.

I completed my hospital based General Nursing Training at St Vincent's Hospital, Fitzroy, Vic in May 1976.

I completed my hospital based Midwifery Training at the Royal Women's Hospital, Carlton, Vic in September 1977.

I completed my Bachelor Of Nursing from Edith Cowan University in Perth, WA in June 1995. I completed two years of my Masters Of Public Health at RMIT in Bundoora, Vic -completing a Post Graduate Diploma in Child, Family and Community Nursing in December 1999.

Unfortunately, during the time of my study there was no scholarship available to assist me with the cost of my university studies.

I would have completed the final third year of my Masters (minor thesis) if I had the financial assistance at the time.

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

I am concerned with recommendations 12.3 and 12.2 of the Draft Report regarding removal of midwifery as a qualification prerequiste for MCH nurses and questioning the value of scholarships for MCH programs of study.

I feel these recommendations would reduce the high quality of our Victorian MCH nursing service. Victoria has a high standard of qualification requirements and education for MCH nurses.

Draft Recommendation 12.3;

I am strongly opposed to the removal of midwifery as a qualification prerequisite for MCH nurses. I feel my qualification as a midwife has enhanced my practice as a MCH nurse and has given me a critical base of knowledge and invaluable professional skills to perform my duties well.

I feel the requirement to be a midwife is an essential qualification for MCH nurses.

I will provide some examples of how and why my midwifery training has assisted me in my everyday practice with the families that attend my MCH centre. Example;

Early discharge from hospital mothers and babies can be sent home after 12-48 hours to 3-4 days. I have found many mothers who have presented to me at the initial home visit and at the MCH centre with breast feeding issues/ lactation concerns- not enough milk/ too much milk/ engorgement and mastitis. The mothers are stressed and the babies are not feeding well, not settling and weight gain is poor.

If I was not a midwife I would not know how to assist the mothers with their breast feeding concerns/ mastitis/ poor feeding regime and how to settle the baby.

The mothers would continue to be stressed, unable to sleep with a crying baby which can result in maternal exhaustion and post natal depression.

My midwifery qualification assists me with supporting the new mother and her family and improving

the mother and baby's health and wellbeing.

As a midwife I am able to access a mother's physical recovery such as monitoring her bleeding to ensure there is no post partum haemorrhage/ ensure her perineum heals adequately and without further injury or damage to her pelvic floor. I have found myself often advising mothers to return to hospital or back to her doctor for complications that I have noticed in the early days and weeks after delivery.

As a midwife I have sent babies to the hospital by ambulance for respiratory distress at the home visit/ dehydration after poor feeding and several times to see a doctor for a inguinal hernia which requires immediate attention. I have sent babies to the hospital for high fever and unexplained skin rashes/ cerebral palsy/ heart conditions.

I work in an area of Melbourne where I see many vulnerable families - the parents display significant early parenting difficulties and the children are identified as being at risk of harm. There is drug taking and domestic violence on a daily basis. Reassurance and counselling for me are everyday occurrences as to is communicating with the Police and Child Protection on a regular basis. I feel if I did not have my experience as a midwife and my post graduate study I would not be able to care for the families that attend my MCH centre and I would have no understanding of the families needs and be lacking in empathy for them.

My midwifery and post graduate studies have given me a holistic approach to family centred MCH nursing care in my community. I have found the qualifications to be critical to my work with families in the community.

Victorian MCH nurses have a very high level of qualification and I feel this should not be seen as a negative but a positive as our MCH service is the most highly regarded in the world.

Draft Recommendation 12.2;

I strongly support the need for scholarships for MCH post graduate programs of study. At the City Of Casey, scholarships were introduced to encourage new staff to our outlying areas as we had difficulty recruiting staff to travel to the Melbourne fringe. The scholarships have been a great success- full staffing at present. Many of the nurses have stated they would not have commenced their post graduate study without the financial assistance of a scholarship.

As I mentioned previously, if I had access to a scholarship I would have been able to continue my study and complete my Masters Of Public Health. A scholarship would have provided me with the financial assistance I required.

Consultation:

I am very concerned at the limited consultation undertaken by the Productivity Commission with Victorian nurses. Our service is widely considered to be the best in Australia and has many strengths. I would like the Commission to meet with me and other MCH nurses to discuss our concerns and the recommendations in the draft report.

I thank the Commission for considering my comments.

I would like all the other Australian States to adopt our level of qualifications in Victoria - midwifery and a post graduate study for MCH nursing, so not to diminish and reduce the quality of the Victorian MCH Nursing Service.

Yours Sincerely,

Mary Pekin.