

My name is Louise Dobell I am a maternal and child health nurse in the Victorian system, i have been practicing as a mch nurse for 20 years. My work has been mostly in inner city areas often with refugee and low socioeconomic groups in public housing but also encompassing the more affluent areas of inner city as well. I am a registered nurse a registered midwife and a BA App Science in Community health and Maternal and child health

I am writing to you as i feel very concerned about the proposal in chapter 12 of the early childhood development draft report and the child health workforce. The clauses 12.3 and 12.2 of the report that suggest removal of the midwifery qualification as a prerequisite for mch are the most concerning in a report that claims to be looking at the health of our children.

All of my qualifications equip me for the role I play in assisting families in raising their children. I cannot imagine how the role could be effective in not having midwifery as a prerequisite. The families are now discharged earlier from the hospital system and rely on our midwifery skills to follow the mother's and baby's health in the early weeks. There have been many times that I have sent the families back to the hospital due to complications in both the mothers and babies health that I could only have known from the skills and knowledge that my midwifery qualification has given me.

One of our best preventative health and predictors of decreased illness in children is breastfeeding which is a major component of midwifery practice. This is a major role that mch plays in encouraging supporting and teaching families how to succeed in this crucial way to protect and prevent sickness and long term illnesses in their child.

The WHO has much research to show that a nations health of its children can be directly linked to the initiation and length of time that a child is breast fed. This is a vital component of the mch practice and to have nurses who do not have midwifery skills to help families establish breastfeeding would be a backward step in early childhood health.

My postgraduate qualification has been invaluable in giving me the ability to provide quality mch care. There is much theory and rigor in developing knowledge around families and their care and I would not have felt equipped to approach the many complex issues that arise in families if I had not had the postgraduate qualification.

I am concerned that there has been such limited consultation with our service which is seen both nationally and internationally as the best practice model for care of families in the early years of a child's life .With so much research now showing the importance of the early years in development and health it would seem important to look at the best practice and try to emulate not decimate to a lower level of care.

I thank the commission for considering my comments and hope that there is more consultation with the service at a formal level and we see the service to families of Victoria strengthened not weakened by having less qualified nurses.

Louise Dobell
RN.RM. BA APP SCI MCH
