

Productivity Commission

Early Childhood Development Workforce Study

Draft Report (June 2011)

29<sup>th</sup> August 2011

Dear Sirs

My name is Deidre Stuart and I have practised as a Maternal and Child Health Nurse in Victoria for 18 years. Initially I worked in the City of Richmond, after amalgamation, City of Yarra. For the past 16 years I have worked in Bayside City Council.

I am registered as a midwife and nurse with the Australian Health Practitioner Regulation Authority. I completed my General Nurse Training at the Royal Melbourne Hospital in 1984, then my midwifery training at The Royal Women's Hospital in 1986. In addition, I have completed my Post Graduate Diploma in Child, Family and Community Nursing Science at Latrobe University in 1992.

I am writing in response to Chapter 12 of the Early Childhood Development Draft Report and the "Child Health Workforce". I have grave concerns with recommendations that are described in 12.2 and 12.3 of the Draft Report regarding removal of midwifery as a qualification prerequisite for Maternal and Child Health Nurses, and reviewing the value of scholarships for Maternal and Child Health programs of Study. I know that these recommendations would diminish the quality of the Victorian Maternal and Child Health Nursing service which is greatly enhanced by the significant qualification requirements and education preparation of Victorian MCH nurses.

I am emphatically opposed to the removal of midwifery as a qualification prerequisite for MCH nurses and believe my qualification in midwifery has given me critical expertise and knowledge to practice as a professional Maternal and Child Health Nurse.

In many instances I have used my midwifery knowledge and experience in providing Maternal and Child Health Nursing Care. Without this expertise the client would have been given a less than adequate service. For example, I have cared for many clients where they have experienced complications associated with their placenta during pregnancy, labour and delivery. My midwifery training and knowledge has been invaluable in enabling me to support these women in their physical and mental recovery.

My midwifery education has also greatly enhanced my ability to support clients recovering from the various types of complications in deliveries. My knowledge of midwifery allows me to understand the trauma they have experienced and how this can affect both their, mental and physical, postnatal recovery.

Likewise my midwifery background has provided me with many skills to help support clients in establishing breastfeeding of their newborns.

The requirement to be a midwife has not been a limitation for me to practice as a Maternal and Child Health Nurse, quite the opposite; it has been an essential qualification that assists me to provide a high quality practice.

I also strongly believe that it is important that Maternal and Child Health Nurses be registered nurses. Once again the education and knowledge that I gained through my general nursing training has provided me with a strong foundation for use in my Maternal and Child health practise.

From my General Nurse training I developed an understanding of many diseases such as Diabetes, Hypertension and Cardiac issues. At times during my practice as a Maternal and Child Health I have cared for patients with these illnesses and therefore provided a more beneficial service.

It is extremely important that Maternal and Child Health Nurses complete a Post Graduate Diploma in Child, Family and Community Nursing in Science. This Diploma enhanced my knowledge and expertise to practise. From these studies I had a greater understanding of research and evidence based practice.

Finally, I wholeheartedly believe my qualifications as a registered nurse, midwife and Maternal and Child Health post graduate have been critical to my ability to provide top quality Maternal and Child Service. Having these three vital qualifications should be viewed as essential to providing a professional, quality Maternal and Child Health Nursing Service for the future benefit of Australia's families and children.

To enable the future of excellent quality Maternal and Child Health Nurses the ongoing provision of scholarships is necessary. These scholarships have proven very successful in Victoria in supporting the development of Maternal and Child Health Nurses.

I am very concerned with the limited consultation undertaken by the Productivity Commission with Victorian nurses. It is disappointing that the Commission has not held Public Sitings with the Victorian Maternal and Child Health Nurses. I, along with my colleagues, would be grateful for an opportunity to meet with the Commission to discuss the strengths of the Victorian Maternal and Child Health Service.

The Victorian Maternal and Child Health Service is respected and known nationally as a **leader** in caring for families with young children. This was clearly evident from the presentations I recently witnessed at the May 2011 National Maternal and Child Health Conference.

I believe that the Victorian Maternal and Child Health Service provides an excellent model that is currently being shared with the other states and territories to lift the standard of the service nationally. It would be a great loss to all Australians to have the quality of the Victorian MCH Service diminished by reducing the need for crucial qualifications that are required to practice.

I thank the Commission for considering my comments above.

Regards

Deidre Stuart