

## SUBMISSION FOR THE PRODUCTIVITY COMMISSION,

I am Bernadette Harrison, a registered Nurse, Midwife, Maternal and Child Health (MCH) nurse. I have been a MCH nurse for 15 years and Midwife for 12 years and worked across several metropolitan suburbs in my career. I am writing to express my concerns in relation to the Draft Report and recommendations.

I am extremely concerned about the recommendations in the Draft Report 12.2 & 12.3 regarding the removal of Midwifery qualification as a pre-requisite for MCH and Scholarships.

The removal of the Midwifery qualification will not only reduce the knowledge, skills and clinical expertise that is highly valuable and provides an holistic approach, it will cause an expansive void in the area of MCH that would lessen this quality service and care given by the Maternal and Child Health Nurses. I strongly oppose this recommendation of removing the midwifery qualification.

The qualification requirements Victorian MCH nurses receive, not only prepares them for the perinatal period but through until school age, allowing the MCH nurses to gain a thorough understanding of the family dynamic.

Without the midwifery skills I believe management of some families would have lacked the holistic approach, understanding and appropriate follow through. An example of a mother with breast pain, unable to breast feed her baby; unable to seek medical advice and sought assistance from the MCH nurse. My midwifery skills had given me the knowledge and skill to establish the immediate concerns, manage and refer appropriately.

The Draft Recommendation 12.2 regarding scholarships and I again strongly recommend that the scholarship program continue and be expanded to ensure midwives are offered the chance to gain financial support when undertaking their MCH education. Scholarships are a way in which a nurse can be supported financially to pursue a career that they may otherwise not be able to complete. Many students I have spoken too have reported without the scholarship they would not have considered a career in MCH due to the cost, since many have other commitments such as family and work. Also this strategy has been successful in addressing MCH workforce issues.

The Draft report has been thrust upon the nursing sector with very little consultation or discussion by MCH nurses or affiliated bodies. This being a sad indictment and disrespect on the MCH service. This report has not

highlighted or focused on the fact that the Victorian MCH service is renowned worldwide and are leaders in the field of Family and Community nursing.

I believe prior to this Draft report making final recommendations, that all MCH nurses be consulted at a greater level and I would appreciate the opportunity to attend to ensure that the Victorian MCH nurses continue their high quality support to families across the state.