
Woman Centred Continuity of Care Maternity Models

Initiative Type

Redesign

Status

Deliver

Added

04 May 2018

Last updated

04 May 2021

URL

<https://test.clinicalexcelsence.qld.gov.au/improvement-exchange/woman-centred-continuity-care-maternity-models>

Summary

The Women and Newborn Maternity Redesign and reform project commenced in March 2017, restructuring the maternity workforce (internal and external) into closely aligned inter-professional teams servicing a geographically based population and increasing access to the Continuity of Care program are key elements of the redesign. The model incorporates wellness and psychological care

within a multidisciplinary framework whilst recognising and managing heightened risk. The needs of the woman and her baby determine whether she requires primary, secondary or tertiary care with these services being distinct but integrated.

Key dates

Mar 2017

Implementation sites

Gold Coast Hospital and Health Service

Key Contacts

Hazel Brittain

0169

paul.blee.hiu

Service Director, Women-Newborn-Children's Services

Gold Coast Hospital and Health Service

(07) 5687 5728

Hazel.Brittain@health.qld.gov.au

Aim

Improving the efficiency and effectiveness of maternity services and aligning services to consumer expectations.

Benefits

- Consumer engagement in review and co-design of services and models of care ensuring services are woman and family centred.
- Workforce engagement in review and co-design sustaining and strengthening interdisciplinary professional contribution.
- Interrogates of each step of the patient journey in order to optimise services and create an environment of continuous improvement, engagement and sustainability.
- Ensures services are evidence based, audited and benchmarked.

Background

There is an imperative to reconfigure the delivery of maternity care services at Gold Coast Health (GCH) in order to ensure the key goals of quality, effectiveness, efficiency and improved client experience are met along with the increasing demands for service associated with population growth and increasing complexity.

Evaluation and Results

Despite the evidence demonstrating the benefits of Continuity of Care models for families, health professionals and health care organisations scaling-up Continuity of Care maternity models has proven elusive in the Australian context. Gold Coast Health is leading the way and as such will be well positioned to continue to provide high quality evidence based maternity care into the future for the Gold Coast community, and to assist other maternity services to develop and grow.

References

Commonwealth Dept. of Health and Ageing (DoHA). Improving maternity services in Australia: the report of the Maternity Services Review. Canberra 2009. Creedy, D., Shochet, I., Horsfall, J. (2000) Childbirth and the development of acute trauma symptoms: Incidence and contributing factors. Birth 27: 104-111. Creedy, D., Creedy, D.K., Sidebotham, M., Gamble, J., Pallant, J., Fenwick, J. (submitted March 2016) Prevalence of burnout, depression, anxiety and stress in Australian midwives: A cross-sectional survey Submitted to BMC Pregnancy & Childbirth Davis-Floyd, R. (2001). The technocratic, humanistic, and holistic paradigms of childbirth. International Journal of Obstetrics and Gynaecology, 75: 5-23. Department of Human Services (DHS), 2008. Having a Baby in Victoria. Victorian Government Health Information, State Government of Victoria. Retrieved from <http://www.health.vic.gov.au/maternity/index.htm>? Department of Health. National Maternity Services Plan 2010.

Canberra: Commonwealth of Australia; 2011. Hirst C. Re-birthing: report of the review of maternity services in Queensland. Brisbane, Queensland Health; 2005. Homer C, Brodie, P., Leap, N. (2003) Midwifery Continuity of Care: A Practical Guide. Elsevier, Sydney. Homer, C.S.E., Friberg, I.K., Dias, M.A.B., Ten Hoop-Bender, P., Sandall, J., Speciale, A.M., et al. (2014). The projected effect of scaling up midwifery. *Lancet* 384(9948):1146-57. Kildea, S., Kruske, S., Sherwood, J. (2010). 'Midwives working with Aboriginal and Torres Strait Islander women', in Editors: S. Pairman, J. Pincombe, C.Thorogood and S. Tracy (eds.), *Midwifery Preparation for Practice 2nd Edn.*, Sydney, Elsevier. Renfrew, M.J., McFadden, A., Bastos, M.H., Campbell, J., Channon, A., Cheung, N.F., et al., (2014). Midwifery and quality care: findings from a new evidence-informed framework for maternal and newborn care. *The Lancet*, Sept 20, 384 (9948): 1129 – 1145. Sandall, J., Soltani, H., Gates, S., Shennan, A., Devane, D. (2015) Midwife-led continuity models versus other models of care for childbearing women. *Cochrane Database Syst Rev.* 2015(9):CD004667. Tracey, S.K., Hartz, D., Tracey, M., Allen, J., Forti, A., Hall, B., et al (2013) Caseload midwifery care versus standard care for women at risk: M@NGO a randomised control trial. *The Lancet* 382: 1723-32

PDF saved 20/09/2024