



## **Public Submission Cover Sheet**

Please complete this sheet and submit with any attachments to the Sustainable Health Review Secretariat

Your Personal Details		
This information will be used only for contacting you in relation to this submission		
Title	Mr 🗌 Miss 🗌 Mrs 🗌 Ms X Dr 🗌 Other 🗌	
Organisation	PERTH MATERNITY	
First Name(s)	KAREN	
Surname	KRUIT	
Contact Details		
Publication of Submissions		
Please note all Public Submissions will be published unless otherwise selected below		
I do not want my submission published		

I would like my submission to be published but remain anonymous

#### **Submission Guidance**

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You are encouraged to address the following question:

In the context of the Sustainable Health Review Terms of Reference listed below, what is needed to develop a more sustainable, patient centred health system in WA?

- Leveraging existing investment in Primary, Secondary and Tertiary healthcare, as well as new initiatives to improve patient centred service delivery, pathways and transition;
- The mix of services provided across the system, including gaps in service provision, sub-acute, step-down, community and other out-of-hospital services across WA to deliver care in the most appropriate setting and to maximise health outcomes and value to the public;
- Ways to encourage and drive digital innovation, the use of new technology, research and data to support patient centred care and improved performance;
- Opportunities to drive partnerships across sectors and all levels of government to reduce duplication and to deliver integrated and coordinated care;
- Ways to drive improvements in safety and quality for patients, value and financial sustainability, including cost drivers, allocative and technical efficiencies;
- The key enablers of new efficiencies and change, including, research, productivity, teaching and training, culture, leadership development, procurement and improved performance monitoring;
- Any further opportunities concerning patient centred service delivery and the sustainability of the WA health system.





#### **Submissions Response Field**

*Please type your response into the field below. Alternatively you may provide your submissions as a separate attachment (Suggested Maximum 5 pages).* 

Perth Maternity is an innovative **bulk bill** maternity practice aimed at providing midwifery care right where it is needed most - in the community. We are happy to take referrals from as early in the pregnancy as possible.

This is the first maternity service in Perth where all Medicare endorsed midwives work within a recognised governance structure to ensure that clinical risks are minimised through strong collaborative pathways. The service has a Medical Director working collaboratively with the endorsed midwives. Care is based on the protocols and guidelines set by WA's tertiary maternity hospitals.

Perth Maternity midwives will arrange the appropriate hospital referral and the woman's GP will remain the primary contact for all non-obstetric related health issues.

### Perth Maternity Fact Sheet

**Evidence based maternity care** recommends continuity of care throughout the maternity continuum offering holistic, woman centred care by a known maternity care provider. Choices in childbirth options, screening options and individualised education and preparation for parenting demonstrates improved satisfaction rates for women and improved perinatal outcomes for mothers and babies.

Women will usually see their GP for their confirmation of pregnancy visit The GP has two options where an endorsed midwife is located within their practice

#### **Option 1**

Proceed with pathology tests to confirm pregnancy Refer for booking bloods once pregnancy confirmed Refer for dating scan Refer for FTS Refer to birthing hospital Follow-up to arrange anatomy scan Review scan results at 20 weeks Review as required for general medical consults Hospital to continue antenatal care





#### **Submissions Response Field**

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Advantage of care option	Limitation of care option
• Continuity of care with GP	<ul> <li>Choices in maternity care may not be explored</li> </ul>
Traditional screening	<ul> <li>Choices in screening options may not be explored</li> </ul>
options offered	• Continuity of midwifery care not be accessed in the
• Traditional maternity care	general antenatal hospital clinic
provided	Traditional maternity care being offered

#### Option 2

Proceed with pathology tests to confirm pregnancy if required

#### Refer to on-site midwife to:

- Discuss maternity care option
- Discuss previous birthing experiences
- Complete an obstetric risk assessment
- Refer for early GTT if indicated
- Complete National Woman-Held Pregnancy Record

GP refer for booking bloods once pregnancy confirmed Referral for dating scan

#### Refer to on-site midwife before 10 weeks to:

- Discuss second trimester screening option for FTS, NIPT, NEST, MSS
- Discuss available maternity care option for CMP, MGP, FBC, VBAC and private obstetric care and to send early referrals to secure a place as limited numbers available for these models of care

GP follow-up after 12 weeks for Influenza vaccination and review of progress in pregnancy Anatomy scan request form provided for bulk billed scan unless NIPT / NEST indicated

#### Refer to on-site midwife before 16 weeks to:

- Complete direct hospital referrals (CRS referrals not required for maternity) based on woman's choice or postcode.
- Complete shared care documentation
- EPDS completed and early referrals to be arranged if indicated

GP follow-up after 19 week anatomy scan AND...

#### Refer to on-site midwife from 20 weeks to:

- Ongoing continuity of midwifery care at the GP surgery
- Shared care with birthing service as arranged
- Linked with student midwife through CCE program for continuity through labour and birth





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- Commence the GROW chart (aimed at reducing the perinatal stillbirth rate)
- Timely referrals to birthing services where tertiary / obstetric review indicated
- Referral for all second and third trimester pathology and imaging tests
- Third trimester EPDS screening
- One-to-one education on labour, birth and neonatal care in third trimester
- Postnatal follow-up arranged until 6 week post birth

#### GP remains involved in the maternity care after 20 weeks and ongoing for mum and baby

GP follow-up for 28 week pertussis vaccination Review for Mental Health Care Plans where indicated Review for Physio Care Plans where indicated General medical review as required throughout pregnancy Postnatal 6 week check and neonatal check Neonatal 6-8 week immunisations Contraceptive counselling and management of LARC contraception as indicated.

#### Advantage of care option

- Evidence based maternity care provided
- Continuity of care with GP throughout the pregnancy
- Continuity of maternity care at GP surgery throughout maternity continuum
- Access to continuity of midwifery care at the practice from the 1st trimester of pregnancy until 6 weeks postpartum
- Individualised collaborative maternity care offered
- Improved maternal perinatal mental health
- Reduced maternal and fetal/neonatal morbidity
- Improved breastfeeding rates
- Improved maternal satisfaction

# Limitation of care option

No limitations