
First Nations Midwifery Group Practice

Initiative Type

Service Improvement

Status

Deliver

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Summary

Rural women who have to travel to hospitals for birthing often feel they lack the comfort and reassurance of a familiar face of a health practitioner who knows them, their circumstances and their history well. This project commenced with a Midwifery Group Practice (MGP) team to provide continuity of care for First Nations women across the South Burnett. Through the program, a

pregnant woman is provided with a midwife who will accompany her at every step of her journey, including antenatal appointments, childbirth and postnatal care. The MGP program gives women the comfort and reassurance of a familiar face who knows them, their circumstances and their history well, and it gives midwives greater job satisfaction by getting to know the mums in their care and being able to see them through this amazing chapter in their lives. As the service continues to grow and develop it will continue to be responsive to the First Nations community, including additional outcomes and innovations such as

- working with local, community-led structures like Gundoo and Cherbourg Aboriginal Shire Council, to deliver where community are able to lead changes in process. The team wants to better understand the qualitative benefits of this work to continually improve as well as developing better understanding of the operational implications for quality maternal and child health care in First nations communities like Cherbourg.

Key dates

Jul 2020

Sep 2021

Implementation sites

Cherbourg, Kingaroy, Murgon, Wondai, Nanango

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Aim

To enable women who identify (or whose baby identifies) as Aboriginal and Torres Strait Islander to remain at home as much as possible and continue to receive continuity of midwifery care throughout the pandemic (and ongoing).

Benefits

- increased care on community
- increased engagement of women who historically have not engaged with the service whilst pregnant
- individualised care for women and their families
- flexibility to reschedule appointments outside of traditional clinic hours
- increased engagement with Aboriginal Health Workers (AHW)

To further support mums from rural areas, they also set up a new two-bedroom, fully furnished unit for mums and their families travelling to Dalby for the birth of their baby. This unit gives mums the option of having a place to stay prior to birth and for the first few days after their new baby arrives.

Background

COVID-19 meant that Cherbourg went into strict lockdown with restrictive measures. Residents required permits and a curfew to pass military or police checkpoints. This posed a significant barrier to First nations women needing access to Maternity Care. It also impacted significantly on the social and emotional well-being of the community.

Solutions Implemented

Allocation of a dedicated primary midwife for the duration of antenatal, intrapartum and postnatal care, increased home visits and increase in the use of telehealth. The success of the project has resulted in realignment of existing funding for the 2021-22 financial year to ensure the service can be maintained and increased to be offered to all women across South Burnett.

Evaluation and Results

Continuity of care to a service resulted in increases of:

- vaginal births increased by 11%
- breastfeeding at discharge from the inpatient increased by 1%
- engagement in antenatal care increased by 4%
- weights of babies at birth increased by 4%
- gestation at birth percentage to term.

Lessons Learnt

- Staff who have worked in the same service for many years can be resistant to change
- Engaging with the junior midwives who learn continuity through their University degree and encouraging them to be champions is key.

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