NARRANDERA HEALTH SERVICE
Shared Care Community Midwifery Model of Care (SCCM)

Prepared by: Pauline Hatherly DNM
& SCCM Midwives
July 2014
Updated March 2015
Narrandera ceased birthing in June 2011

Unable to recruit Registered Nurses/Registered Midwives for the service

Narrandera continued to offer antenatal postnatal and elective caesarian sections

Gap in postnatal care identified by RNM & Man.

Steering Committee, including local VMO’s, supported the introduction of a new model of care
The Community midwife cares for couples throughout their pregnancies, and in the early days at home with their new baby.

The service aims to assist parents to make informed choices re pregnancy, birth and beyond.

To provide opportunity for minimal disruption to family unit in a safe environment.

Provide appropriate education to increase patient confidence in parenting skills and promote rewarding parenting experiences.

Early discharge to home environment with timely follow up.
Narrandera Health Service

SCCM Proposal

- Approval from MLHD CE for new model of care, the Shared Care Community Midwife (SCCM) Model within existing FTE

- SCCM was formed (low risk model) and Midwives engaged in getting the program established.

- Midwives developed forms, brochure, statistical collection criteria

- Midwives visited birthing hospitals to inform of the new trial model of care
Narrandera Health Service
SCCM
Reason for proposal

- Continued Maternity service to Narrandera and the surrounding communities
- Recruitment and retention of staff to NHS
- To improve consistency, continuity of care and access to community midwifery program, providing support to all
- To reduce the LOS in hospital care before and after birth
- Reduce readmission rates
Narrandera Health Service
SCCM

Background

- Michelle Sleep, MIA Rural Group Manager, was the Executive sponsor for the Project

- An Evaluation Report after 6 months with quantitative and qualitative data developed by HSM Jill Casley, completed and forwarded to MLHD Executive for approval to continue in March 2014
<table>
<thead>
<tr>
<th>Year</th>
<th>Births</th>
<th>Normal Births</th>
<th>Caesarian Elective</th>
<th>Caesarian Emergency</th>
<th>Caesarian Total</th>
<th>Caesarian %</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007/2008</td>
<td>95</td>
<td>65</td>
<td>13</td>
<td>17</td>
<td>30</td>
<td>31%</td>
</tr>
<tr>
<td>2008/2009</td>
<td>100</td>
<td>65</td>
<td>20</td>
<td>15</td>
<td>35</td>
<td>35%</td>
</tr>
<tr>
<td>2009/2010</td>
<td>99</td>
<td>53</td>
<td>30</td>
<td>16</td>
<td>46</td>
<td>46%</td>
</tr>
<tr>
<td>2011/2012 (to 31 Jan 2012)</td>
<td>10</td>
<td>4</td>
<td>6</td>
<td>0</td>
<td>6</td>
<td>No birthing services</td>
</tr>
<tr>
<td>2012/2014 (1 Feb 2012 to 30 June 2014)</td>
<td>16</td>
<td>1</td>
<td>15</td>
<td>0</td>
<td>15</td>
<td>No birthing services</td>
</tr>
</tbody>
</table>
# Narrandera Health Service Evaluation of SCCM

## Antenatal Clinic Data (2011 to July 2014)

<table>
<thead>
<tr>
<th>YEAR</th>
<th>NUMBER</th>
<th>COMMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>25</td>
<td>From June 2011 (6 months)</td>
</tr>
<tr>
<td>2012</td>
<td>44</td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td>34</td>
<td>15 from Jan to July&lt;br&gt;19 from Aug to Dec</td>
</tr>
<tr>
<td>2014</td>
<td>38</td>
<td>January – July 2014 Booking in</td>
</tr>
</tbody>
</table>
### Narrandera Health Service Evaluation of SCCM

#### Other Statistics

<table>
<thead>
<tr>
<th>ISSUE TYPE</th>
<th>NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Readmission Rate of Newborns or Mothers</td>
<td>0</td>
</tr>
<tr>
<td>Breastfeeding on Discharge from SCCM</td>
<td>26</td>
</tr>
<tr>
<td>Artificially Feeding on Discharge from SCCM</td>
<td>18 (33%)</td>
</tr>
<tr>
<td>Breastfeeding &amp; Artificially Feeding on Discharge from SCCM</td>
<td>9</td>
</tr>
</tbody>
</table>
Narrandera Health Service
Evaluation of SCCM

Feedback from Midwives:

- Provides continuity of care throughout ante and postnatal care
- Improved antenatal care, patient bookings, good verbal feedback from mothers, mothers more confident, hearing tests and heel pricks are being done at home
- Good story – mother discharged not breastfeeding and commenced breastfeeding on day 3
- All Midwives wanted the program to continue
Narrandera Health Service
Evaluation of SCCM

Midwives felt need for Improvement:

- Referrals, communication, breastfeeding education and/or clinic, attitude of general ward staff, more clinical supervision, booking of pool vehicles, organising appointments, risk assessment process for elective caesareans

- Making contact with NUM/RNIC when commence shift and during the shift as required

- Meetings held and issues above addressed successfully
Narrandera Health Service
Evaluation of SCCM

Feedback from Mothers participating in SCCM Program:

Mothers are satisfied with:

- Not feeling rushed, time given for questions, good advice on breastfeeding, being helpful, convenience of the program, improved confidence, feeling safe, home with family

Mothers feel need improvement:

- Increased awareness of the program, need to advertise more eg. radio newspaper, feeling cheated due to not knowing about the service
- Continuation of the service
Narrandera Health Service
Evaluation of SCCM

Feedback from VMO’s

- VMO’s are very happy with the care provided by Midwives in the home (based on feedback from mothers receiving this care)
- The SCCM supports early discharge from hospital
- Midwives contact the VMO if there are any issues or concerns
- Recommended continuation of the service
Narrandera Health Service
Evaluation of SCCM

Brief Analysis of Feedback

- Service well received in the community
- Midwives gave very good feedback
- Mothers very satisfied with the SCCM program
- VMO’s gave very good feedback
- VMO’s working with Midwife in the Antenatal Clinic one day per month
- All want the program to continue
Brief Analysis (continued)

- Some improvements to the day to day management of the program required as program developed

- Management need to ensure that the review of the Nursing Profile encompasses the FTE required for this service (1.5FTE)
Narrandera Health Service Evaluation of SCCM

- NHS has successfully managed the pilot project
- Now offers an effective, sustainable and safe Maternity Service to Narrandera Community
- Current skilled and experienced Midwives available to care for mothers and babies early discharge from birthing hospitals
- Local Solution for the community through consultative process
- Approval to continue the Service was given by MLHD Executive July 2014
Narrandera Health Service
SCCM

- Challenges continue to include:
  - Site remaining within existing FTE
  - Continuing communication with Birthing hospitals
  - Continuing consultation & feedback with Mothers and community