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**THE LEGISLATIVE ASSEMBLY FOR
THE AUSTRALIAN CAPITAL TERRITORY**

MINISTERIAL STATEMENT

**Update on ACT Government Response to Report on Inquiry into
Maternity Services in the ACT - Standing Committee on Health, Ageing and
Community Services Report 10**

**Presented by
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Madam Speaker, I am pleased to update members on the ACT Government's ambitious plans for public maternity services through our recently released 10-year plan – *Maternity in Focus: The ACT Public Maternity System Plan 2022-2032*.

This Statement also serves as an update on the ACT Government's Response to the Standing Committee Report on the Inquiry into Maternity Services in the ACT. In particular, Members may recall that in response to Recommendation 2 of the Report, the Government committed to delivering an implementation plan for the National Strategy for Maternity Services, *Women-centred care: Strategic directions for Australian maternity services*.

On Friday 22 June 2022, I launched *Maternity in Focus* and its corresponding First Action Plan. This holistic and strategic Plan sets the Government's ambition and direction for the evolution of our public maternity services over the coming decade. I table a copy of *Maternity in Focus* and its First Action Plan for Members' information.

The Plan takes a system-wide approach with a vision to provide the right maternity care at the right time, which meets the needs of the woman or pregnant person and their family and encompasses their social, emotional, physical, psychological, spiritual and cultural needs and expectations. To meet this vision, the Plan identifies four themes of focus: consumers, best practice maternity care, clinical governance and data, and workforce.

The Government has taken a strategic and holistic approach to system- and service-level reforms to the public maternity system. Instead of delivering multiple project and implementation plans, there is a single, comprehensive public maternity system plan. This consolidated plan has been produced through collaboration between the ACT Health Directorate, Canberra Health

Services and Calvary Public Hospital Bruce. Several national and local strategies have informed this plan including:

- Woman-centred care: Strategic directions for Australian maternity services – the national maternity strategy;
- the National Stillbirth Action and Implementation Plan;
- the Australian National Breastfeeding Strategy: 2019 and beyond;
- the Evaluation of the Publicly-funded homebirth trial in the ACT;
- the Safer Baby Bundle; and
- the ACT Government Response to the Inquiry into Maternity Services in the ACT.

Both *Maternity in Focus* and the First Action Plan have been developed based on extensive internal and targeted external consultation across ACT Health Directorate, Canberra Health Services, Calvary Public Hospital Bruce, academics, consumers, non-government organisations, tertiary education institutions, unions, other jurisdictions and professional bodies.

The documents reflect the personal experiences shared through the Inquiry process and the opportunities for improvement identified by stakeholders.

I would like to take the opportunity to thank all those who shared their personal experiences for the insights that these have provided.

I want them to know that they have been heard and the experiences they shared have helped shape the ongoing reform to our public maternity system as evidenced by *Maternity in Focus* and the First Action Plan.

While COVID-19 impacted the ability for some stakeholders to participate in this work, the ACT Government is committed to continuing stakeholder collaboration through the implementation of *Maternity in Focus*. One of the first actions the Government is taking is to establish a stakeholder reference group to help guide implementation and ensure that the Government continues to be informed by consumers and experts.

As a first and critical step, the \$12.1 million 2022-23 Budget initiative that supports this Plan includes funding to implement a system-wide maternity satisfaction tool to ensure we can measure our progress, understand individual experiences, and respond across our system to improve service delivery. The Government is also investing to undertake an evaluation of Canberra Maternity Options to ensure it continues to work for consumers.

Over the next 10 years, the Government will continue to work with consumers and stakeholders to transform the public maternity system, looking at opportunities to innovate and evolve the system to meet future demands and expectations.

Outlining our priorities over the next ten years, *Maternity in Focus* is designed to inform and prioritise practical steps to create sustainable and meaningful change across our service.

The accompanying First Action Plan outlines the actions to be undertaken over the next four years based on evidence, best practice, consolidated consumer and stakeholder voices from the submissions to the Inquiry, and experts across the service.

Maternity in Focus will deliver system and service level changes that better support the needs of individuals accessing the public maternity systems and our frontline health workers.

The Government has already commenced reforming the public maternity system, including:

- exploring opportunities to expand the homebirth model of care
- work to deliver the new Early Pregnancy Assessment Unit at the Centenary Hospital for Women and Children and
- a commitment to midwife/nurse to patient ratios in maternity services as part of phase two of ratios implementation.

The commencement of work to implement nurse/midwife ratios in maternity is good news for mothers, pregnant people and their babies and for the dedicated nurses and midwives in our public hospitals. It will also be a first for Australia, which is why we need to start working through the detail now to get it right. I look forward to continuing this work with the Australian Nursing and Midwifery Federation ACT and our health services.

Through the Inquiry, we heard strong advocacy for increased continuity of care for women and pregnant people. In response to this, a focus of reform in the public maternity system is expansion of the continuity of care models.

The ACT already has the highest proportion of births in the public system supported through midwife-led continuity of care. Through the Plan the Government has committed to more than 50 per cent of women and pregnant people having access to this model of care by 2028. This is a significant commitment that will deliver better outcomes for Canberrans, but something that will require detailed planning with our brilliant midwives over the coming

years. The expansion of this model will allow us to work with health professionals to grow a sustainable continuity of care workforce and attract midwives to the ACT.

Work will be undertaken with Aboriginal and Torres Strait Islander people, individuals experiencing vulnerability or disadvantage, and those with complex medical issues or a disability to determine how to improve their access to this model. We get great feedback on the all-risk continuity program through Centenary Hospital for Women and Children known as CatCH, but we know there is more demand than can currently be met.

The Government understands the importance of connection to culture and country for Aboriginal and Torres Strait Islander women, pregnant people and their families. Our services will actively work with consumers, community organisations, Aboriginal and Torres Strait Islander Elders and other stakeholders to understand what Birthing on Country means for the ACT region and to develop an ACT specific Birthing on Country model.

This land is and always will be Aboriginal land and the ACT Government wants to ensure the public maternity system offers a culturally safe and appropriate place to support all Aboriginal and Torres Strait Islander peoples.

We will also work with culturally and linguistically diverse consumers and appropriate community organisations to ensure our maternity services are culturally sensitive and appropriate.

There is also a strong focus on improving access to perinatal mental health services for women, pregnant people and their families.

With perinatal depression and anxiety affecting 1 in 5 mothers or pregnant people and 1 in 10 fathers or partners, the impact on both parents and children can be significant.

We are committed to increasing perinatal mental health supports for women, pregnant people and their families, including improving referral pathways for early mental health supports.

This commitment is bolstered by the investment of more than \$14 million through the 2022-23 Budget that will expand access to perinatal mental health services, including delivering a dialectical behavioural therapy program for mothers and infants. This is a significant commitment that my colleague the Minister for Mental Health will no doubt have more to say about.

In addition, the 2022-23 Budget includes funding for a scoping study into residential mental health services for new parents and their babies, with the aim of delivering this service within the next four years.

Unfortunately, we know that pregnancy and birth don't always go to plan.

Miscarriage, stillbirth, newborn death and infant loss are tragic and traumatic events for parents, their loved ones and indeed those who care for them during pregnancy and birth. The shock, disbelief and confusion that comes with this loss can have long-lasting psychological and social impacts for a parent and their family.

For those experiencing perinatal loss including miscarriage or stillbirth, health professionals will ensure individuals are involved, informed and supported through these experiences.

Rather than resharing their story with each new health professional, continuity through bereavement care will be provided in collaboration with expert perinatal loss care providers. These health professionals will work together to help families experiencing loss to navigate through this period and provide warm referral and connection to other services that meet their needs.

I would like to thank and acknowledge the hard-working health professionals who continue to provide high quality care and compassion during the unprecedented and unpredictable challenges of the last few years.

The ACT Government has an ongoing commitment to support and nurture our public maternity workforce to reach their full potential and feel supported in their roles. We know the last two and a half years have been particularly difficult, including as a result of COVID-related visitor restrictions and workforce shortages. There are no simple answers to addressing the ongoing impact of these stressors, but we are committed to finding better ways to support the wellbeing of our incredible frontline health care workers.

Madam Speaker, building capacity and expanding capability is the focus of several actions the Government has funded through the 2022-23 Budget, including:

- system-wide maternity workforce planning; and
- establishment of new scholarship opportunities for nurses and midwives.

We have committed funding to these initiatives because we've heard from our dedicated midwives that they want scope to innovate and deliver even better and more sustainable outcomes for all Canberrans and their families.

But we also recognise we need to continue growing the system.

Through the 2021-22 and 2022-23 Budget we have funded an extra 36 full time equivalent roles across our public maternity services to deliver more services and grow our capacity – delivering two new neonatal intensive care cots at Canberra Hospital, three new special care nursery cots at Calvary Public Hospital Bruce and establishing a gestational diabetes mellitus service at Calvary for Canberra's north.

In addition, the Government is continuing to work to ensure public maternity services provide a safe, supportive and respectful environment for staff, enabling them to thrive and putting them in the best position to support the ACT community. This includes the \$7.2 million investment to support our workforce to embed a safer culture in our healthcare services delivered through the 2022-23 Budget. This investment contributes to key actions outlined in the First Action Plan – delivering a safer workplace and continuing our work delivering the *Towards a Safer Culture* strategy.

Madam Speaker, all of these initiatives will deliver more services, with a growing workforce, supported to thrive and innovate, reducing pressure and increasing access to care closer to home.

Many of the actions in this plan will bring about fundamental and foundational changes to our public maternity system. These actions will be built on to ensure our services are accessible, accountable and sustainable into the future.

I am proud to share this important work, which has been contributed to by so many – including the former Members who undertook the Inquiry into Maternity Services. This work will strengthen our public maternity system and its capacity to deliver the right care in the right place at the right time.

ENDS