Logan Together Foundation Roadmap –Project scoping

Project title: Develop community child and maternal support centres

Strategic or Chapter-based project: Strategic

Short description: Strive for universal access to and engagement with care throughout the pre-birth, birth and post birth period to Age 1 by significantly developing 'community maternity centres' that offer community-based continuity of care models including/with the following features:

- Long-term relationship based care pre and post-natal
- Social and emotional wellbeing screening and support
- Antenatal care
- Child development and parenting education
- Social connection opportunities
- Links to birthing options and hospitals

New Zealand Plunkett model has been cited as a good example.

What results does it help Logan Together to achieve?

Foundation Roadmap scoreboard outcome (life stage)

Healthy pregnancies and healthy babies

Target

Increase the % of pre-natal and post-natal visits by XXX

Reduce smoking during pregnancy by 7.4%

Reduce number of overweight pregnant women by 12.1%

Indicators (how do we know the outcome is being achieved)

Increase in women and their partners attend scheduled pre and post-natal visits

Increase in women not smoking or stop smoking during pregnancy

Why will it help achieve those results?

The course of action for and the research about continuity of care in the community is prolific. Depending on your outcome criteria (maternity has many), whether it be increase breast feeding rates, lower C-section births or improved engagement with services, community base maternity services are positively reflected. Evaluation of continuity of care in a report by Enkin et al (2000) found women attended more antenatal education, felt more able to discuss concerns, felt more in control and felt staff were more supportive during labour.

The stipulation seems to be that continuity of care is provided collaboratively by midwives and obstetricians (Sandall et al). The majority of evidence here is about midwifery care, not continuity of

medical-led care. Caseload midwifery within a clinical team working together in a community maternity clinic, show multidisciplinary team practices effective in safeguarding the health of the mother, family and child (Caroline S. E., et al 2001). Studies and reforms in the late 1990s in New Zealand indicated that continuity of care benefits derived from a 'lead care", not necessarily from (only) direct midwife care or obstetric care.

Community maternity hubs are vital for continuity of care and importantly the community controlled maternity model should be considered. Community maternity hubs are spaces for the community - for facilitated groups, health delivery, social services and integrated care. There is evidence to suggest that women in community maternity groups attend slightly more antenatal visits, and have fewer caesarean sections (Thompson & Wojcieszek 2012).

There is also evidence to suggest that enabling delivery of local, high quality service ensures a high level of access for a broad spectrum of people within the community (Queensland Health 2003). A major factor for consideration is assuring that the hubs are 'in reach' of a hospital to manage emergency situations that may arise.

Project details: to be determined

Data and scale:

There are strong correlations between a number of peri-natal risk factors, in particular mothers not attending pre-natal checks and smoking during pregnancy– a major risk factor in the life course trajectory of a child.

	Perinatal Risk Factors						
	% Smoking During 1st 20 weeks	**% Smoking During 2nd 20 weeks**	**% First prenatal visit during 3rd Trimester**	**% Low N. Prenatal Visits**	**% Overweight and Obese**	**% Teen Mother**	**% Single Mother Under 25**
Perinatal Risk Factors (Mother) (n=159)							
% Smoking during first 20 weeks of pregnancy	1						
% Smoking after 20 weeks of pregnancy	.955**	1					
% Mothers Attending First Antenatal Visit During 3rd Trimester	.691**	.695**	1				
% Mothers making low number of prenatal visits overall	.666**	.670**	.726**	1			
% Mothers Overweight or Obese	.739**	.788**	.604**	.581**	1		

% Teen Mothers (Mothers Aged Less Than 20)	.750**	.766**	.681**	.605**	.627**	1	
% Single Mothers Under 25	.575**	.664**	.227*	.380**	.353**	.520**	1

** Statistically significant at the .05 level; ** Statistically significant at .01 Level*

We also know that there is a correlation between low numbers of antenatal visits and low AGPAR and premature births.

The below table provides percentages and numbers of suburbs for initial antenatal visit in 3rd trimester and low numbers of ante-natal visits.

Suburbs	% First Ante-natal Visits In 3rd Trimester (>28 wks)	Number	% Low Number of ante-natal visits (0-4)	Number
Australia	-		5.05	
Queensland	-		4.90	
Logan	**5.1**		**9.6**	
Kingston	9.0	20	17.9	40
Eagleby	10.0	26	17.3	45
Beenleigh	10.8	15	18.7	26
Marsden	7.1	20	15.3	4
Slacks Creek	9.9	19	13.0	25
Loganlea	10.6	19	14.5	26
Woodridge	11.2	35	16.3	51
Waterford West	3.4	4	6.0	71
Crestmead	3.9		10.7	
Logan Central	7.6	7	16.3	15
Munruben – Park Ridge South	2.6		2.6	
Browns Plains	3.9	6	11.8	18
Bethania – Waterford	4.6		9.1	

Chambers Flat – Logan Reserve	4.3		8.5	
Edens Landing – Holmview	5.8		9.4	
Regents Park – Heritage Park	3.9		8.7	
Boronia Heights – Park Ridge	2.0		5.9	
Mount Warren Park	4.1		14.9	
Hillcrest	2.5		7.4	
Jimboomba	3.6		7.1	
Greenbank	2.9		9.4	
Loganholme – Tanah Merah	6.1		9.4	
Shailer Park	2.6		6.8	
Logan Village	9.1		3.6	
Daisy Hill	0.0		5.6	
Tamborine / Canungra	3.4		6.1	
Bahrs Scrub / Wolffdene	1.4		9.6	
Rochedale South – Priestdale	1.9		5.3	
Springwood	4.4		2.7	
Underwood	2.0		8.0	
Cornubia – Carbrook	3.4		1.1	

Partners:

Co-design:

Quick wins:

References

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Thompson, R., & Wojcieszek, A. M. (2012). Delivering information: A descriptive study of Australian women's information needs for decision-making about birth facility. BMC Pregnancy and Childbirth, 12(1), 51-60.

Caroline S. E. Homer, Gregory K. Davis, Pat M. Brodie, Athena Sheehan, Lesley M. Barclay, Jo Wills, Michael G. Chapman (2001) Collaboration in maternity care: a randomised controlled trial comparing community-based continuity of care with standard hospital care. British Journal of Obstetrics and Gynaecology January 2001, Vol. 108, pp. 16-22

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Family Home visiting service outline, Government of South Australia 2005

Children Health Queensland Strategic Plan 2013-2017

Metro South Hospital and Health Service Strategic Plan 2015-2019