

“WHO CARES?” CHOOSING A MODEL OF CARE

This information is based on evidence regarding different models of maternity care. Not all models are widely available. Consumers are encouraged to seek the most appropriate maternity care option for their individual needs and circumstances and to ask maternity care providers to provide evidence based care.

As most maternity care in Australia is provided within a medical/hospital framework, understanding models of care will help you to make informed choices about your pregnancy and birth. The model of care that you choose in pregnancy may have an impact on the options and choices that are subsequently available to you during childbirth.

- **The wellbeing of the mother and her child is the primary focus of all professional maternity care**
- **A midwife is the most appropriate primary carer in normal pregnancy and birth**
- **Midwives work collaboratively with doctors, nurses, and other professional care providers in complex birthing situations**

Pregnancy and birth is not an illness. There are many ways in which a pregnant or labouring woman, and those providing care for her, can either work with or interfere in the natural process. When planning for birth it is important that you understand how you, and your professional carers and personal supporters, can act to protect and support spontaneous, uncomplicated birth.

Midwife primary care

Primary (first level) care from a known midwife allows you to develop a partnership and trust in your midwife. This basic model of care has physical, social and psychological advantages for you and your baby. The midwife's scope of practice allows her to work on her own authority as long as you and your baby are well, and to work in collaboration with specialist medical and nursing providers when a complication or illness is detected.

As a primary carer your midwife works to provide normal maternity care from early pregnancy through birth and early parenting. The midwife is available to advise you and monitor your progress throughout pregnancy and to attend when labour has established providing agreed services within the scope of midwifery practice.

Your midwife will arrange appropriate back-up from another suitably skilled midwife to cover when she is not available.

Shared Care

There are many ways in which maternity care is shared between professional carers.

Shared models of care involve midwives and either general practitioners or specialist obstetricians working together to provide care, often within a hospital based maternity service. In these circumstances, the doctor will usually be the leading care provider. Some midwife-managed models of care within birth centres or hospitals have medical supervision, as women booked in that model are required to be reviewed by a doctor at intervals through the care.

Women receiving shared care should be aware that it can lead to fragmentation and lack of continuity of carer, as you may see different midwives and doctors during your episode of care, depending on the setting and the way in which the shared care model is managed.

While some shared models of care strive to provide a known midwife during labour this is not always possible. You should enquire how the shared model of care works in the setting you are considering.

Specialist Care

Specialist obstetricians are doctors who are experts in the treatment of the complications that can lead to poor outcomes in pregnancy and birth and are skilled in surgical options for birth.

If you are experiencing a complicated pregnancy, or you have a serious medical condition separate from your pregnancy, it is appropriate to be under specialist care during your pregnancy and birth.

Specialist obstetricians provide continuity of carer throughout pregnancy if you enter into a private care arrangement, with access to either a private or public hospital for birth. Antenatal care will usually be provided in the doctor's private rooms.

During labour, hospital midwives will monitor your progress and call the obstetrician when birth is imminent. Your care after the birth will also be undertaken by hospital midwives, and your obstetrician will be called if complications arise.

If you choose specialist obstetric care you may also consider seeking the services of a midwife to work in partnership with you and in collaboration with your obstetrician and other hospital staff.

Review of literature: Joy Johnston 2004. Practice Guidelines for the Independent Midwife. Midwives in Private Practice, Victoria. Used with permission. References to academic published material are available at www.maternitycoalition.org.au, or by email to inquiries@maternitycoalition.org.au © Maternity Coalition 2006
Date of publication: July 2006
May be copied without alteration for personal use or for free distribution.