



Australian  
College of  
Nursing

Voice of influence



Australian College  
of Midwives

Mr Ian Frank  
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Dear Mr Frank

**Australian College of Nursing and Australian College of Midwives joint submission to the Australian Medical Council's accreditation of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists**

In response to an invitation received from the Australian Medical Council, the Australian College of Nursing (ACN) and the Australian College of Midwives (ACM) are pleased to provide the following feedback in relation to the accreditation of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists' education, training and professional development programs.

With the view to progressing team-based patient/woman centred health care practice within the Australian health care system, ACN and ACM are taking this opportunity to promote the value and importance of interprofessional education and practice for all health professionals at every career stage.

***Response to Questions 1-3***

**Question 1: Training design and planning**

ACN and ACM would potentially be interested in providing input into the education, training and professional development programs of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG). The opportunity to be actively involved in the design of RANZCOG training would be welcomed, particularly where training has an impact on interdisciplinary understanding, collaboration and care planning. For example, if the training is related to the management of obstetric emergencies, ACN and ACM would encourage the involvement of the professional groups involved in the clinical management in the training development. Such involvement could include participation on a working group or committee membership, revision or review of documents/curricula developed, or invitations for submissions and consultations.

From time to time, ACM has been asked to provide comments/feedback and/or nominate a representative to join committees or working groups involved in designing and developing RANZCOG continuing educational programs. This involvement has been on an ad hoc basis rather than integrated into the design and planning process.

## Question 2: Training Content

The importance of interprofessional education in preparing health professionals for collaborative practice is well documented and it is incumbent upon all health professions to embed its principles in education accreditation and professional practice standards. There is strong evidence that collaborative practice can reduce hospital admissions, patient complications, clinical error rates and conflict between members of health care teams. Collaborative practice can also lead to improved access and coordination of health care services (WHO 2010).

In order to engage more broadly in interprofessional collaborative practice, obstetricians and gynaecologists must have a comprehensive understanding of the role of nurses and midwives in the care of women receiving direct obstetric and gynaecological services as well as the role of nurses and midwives in the provision of more indirect but related care. Recognising the roles and potential roles of nurses and midwives is also vital for service innovation, particularly to support opportunities to promote preventative health care services. The ability of obstetricians and gynaecologists to identify the roles, scope of practice and strengths of other professionals within the health care team is critical for ensuring quality maternal and child health (WHO 2010). Interprofessional education plays an essential role in familiarising health professionals with each other's roles, opening channels of communication and building trust between team members.

While RANZCOG fellows are expected to be able to establish “effective professional relationships with medical, midwifery, nursing and other health care colleagues” and “participate in shared care with (...) midwives”, there appears to be no requirement for obstetricians and gynaecologists to undertake interprofessional training with nursing or midwifery staff (RANZCOG 2010). ACN and AMC believe that interprofessional education provides the best preparation for interprofessional practice and the promotion of shared care and other models of health care delivery.

The benefits of interprofessional education are widely recognised. In 2010, the Department of Health and Ageing released the *National Guidance on Collaborative Maternity Care* report. According to the report, joint education and training is a key principle of collaborative maternity care (DOHA 2010). More recently, the 2013 Health Workforce Australia report *Interprofessional Education: A National Audit* recommended that all professions should adopt interprofessional education requirements in their accreditation standards and in continuing professional development requirements for ongoing registration (HWA 2013).

For these reasons, ACN and ACM would encourage RANZCOG to promote interprofessional education as an essential part of the initial and ongoing education and training of obstetricians and gynaecologists. Because of the central importance of good working relationships between doctors, midwives and nurses for the care of women, ACN and ACM believe that it is essential that all obstetricians and gynaecologists are exposed to interprofessional education **with nurses and midwives** as part of their training and ongoing education.

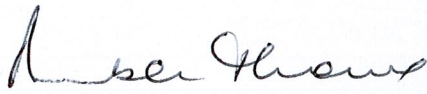
## Question 3: Opportunities for Shared Training

ACN and ACM believe a number of clinical and general training modules could be undertaken in common by obstetricians, gynaecologists, nurses and midwives. ACN and ACM are well placed to provide feedback on components of training and professional development that relate to collaborative practice or the roles of nurses and midwives in obstetric and gynaecological health care settings.

There are some current opportunities for interprofessional training for obstetricians and midwives/nurses, but these need to be expanded. Interprofessional training programs such as the Advanced Life Support in Obstetrics (ALSO) and NSW Fetal Obstetric and Neonatal Training (FONT) provide good examples of the interprofessional approach to emergency management training (ALSO Asia Pacific 2013; NSW Health 2012). However, there is a need for other professional skills such as communication, teamwork, clinical supervision and woman centred care to be included.

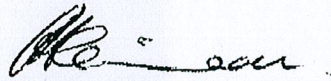
ACN and ACM would welcome the opportunity to progress the initiatives suggested above with you. Please do not hesitate to contact us for further information or discussion on this matter.

Yours sincerely



Adjunct Professor Debra Thoms FACN (DLF)  
Chief Executive Officer

/ July 2013



Ann Kinnear  
Executive Officer

1 July 2013

## References

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