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| --- | --- |
|  | All District Health Boards |
| MATERNITY SERVICES - DHB FUNDED - Pregnancy and parenting INFORMATION AND education**TIER LEVEL TWO****SERVICE SPECIFICATION** |
| **STATUS:** It is compulsory to use this nationwide service specification when purchasing this service. | **MANDATORY** |
| **Review History** | **Date** |
| Published on NSFL | May 2014 |
| Review of Pregnancy and Parenting Education service specification (July 2002)Amendments: updated, edited and two new purchase units created to replace W01002, reporting clarified.  | 1 July 2014 |
| **Amendment:** updated name from ‘National Information and Resources’ to the new website under Your Health entitled ‘Pregnancy & Kids’. | December 2015 |
| Consideration for next Service Specification Review | Within five years |

**Note:** Contact the Service Specification Programme Manager, Ministry of Health to discuss the process and guidance available in developing new or updating and revising existing service specifications. Web site address of the Nationwide Service Framework Library: <http://www.nsfl.health.govt.nz/>

**MATERNITY SERVICES – DHB FUNDED**

**PREGNANCY AND PARENTING INFORMATION AND EDUCATION**

**TIER LEVEL TWO**

**SERVICE SPECIFICATION**

**W01010, W01011**

This tier two service specification for Pregnancy and Parenting Information and Education (the Service) must be used in conjunction with the tier one Maternity Services – DHB Funded and, as appropriate, the tier one Services for Children and Young People service specifications.

This Pregnancy and Parenting Information and Education service specification is also linked to the information/documents listed below:

* Ministry of Health’s website: Your Health/Pregnancy and Kids[[1]](#footnote-1)
* Section 88 Primary Maternity Service Notice 2007 [[2]](#footnote-2)
* Well Child Tamariki Ora National Schedule [[3]](#footnote-3)
* Tier two Well Child / Tamariki Ora service specification
* National Immunisation Schedule [[4]](#footnote-4)
* Current Immunisation Handbook[[5]](#footnote-5)

#### Background

The transitional phase between life before children and becoming a parent is a period when pregnant women and expectant fathers are particularly responsive to and proactive in seeking health information. Depending on their circumstances, parents will have different information and education needs and will seek changes in their social networks.

First-time parents in particular will benefit from receiving information and education with groups of other new parents with whom they may form ongoing friendships and social networks. Other parents may have different needs, eg, subsequent pregnancies, long periods between pregnancies, new relationships, or are new to the area.

#### 1. Service Definition

The Service provides free information, education and support to pregnant women and expectant fathers / partners, parents of new babies including adoptive parents and their and, where appropriate, their whānau to meet their pregnancy and early parenting information, education and social support needs

The Service has two service components:

* the Information Component provides all expectant and new parents with information and resources about key pregnancy and parenting topics
* the Education Service Component is primarily focused on additional support / education for first-time expectant parents and populations with high needs as noted in section 4 of this Service Specification within each DHB region. Key to achieving this will be improving access and acceptability to these groups. The coverage rate for Education Services reflects this focus and is detailed in the Service Coverage Schedule[[6]](#footnote-6).

A group based education programme session may include first-time parents, adoptive parents, and their whānau, as appropriate.

#### 2. Exclusions

The Service excludes pregnancy and parenting education and information services that are either privately funded, or already funded as part of another service such as the Section 88 Primary Maternity Service Notice 2007.

Note: Services provided under Family Start / Early Start, Well Child / Tamariki Ora Services and under the Support Services for Mothers and their Infants / Pepi service specifications overlap with this tier two Pregnancy and Parenting Information and Education Services service specification.

Refer to the table below for overlap of coverage periods with Lead Maternity Carers (LMC) and Ministry of Social Development services:

|  |  |
| --- | --- |
| **Service** | **Coverage period** |
| Lead Maternity Carers | Preconception, pregnancy to 4-6 weeks following birth |
| Support Services for Mothers and Their Infants/Pēpi | Pregnancy and following the birth up until the child is at least 24 months old |
| Well Child /Tamariki Ora (Core services and additional support according to assessed need) | 4-6 weeks following birth to 4 years of age (some areas may deliver services antenatally) |
| Ministry of Social Development funded Family Start / Early Start Service. [[7]](#footnote-7) | 6 months before the birth of the child up to the age of six years. |
| Parents as First Teachers (PAFT) | Birth to three years of age |

#### 3. Service Objectives

### 3.1. General

The Service objectives are to:

* provide parents with pregnancy and early parenting information, education and support to help prepare them for pregnancy, childbirth and parenthood and making informed choices, and
* provide opportunities to share their experiences and form new social networks with other expectant parents.

### 3.2. Māori Health

In addition to the Māori Health generic objectives in the tier one Maternity Services - DHB Funded service specification, the Service will:

* consider and provide advice and support around pregnancy and parenting issues of specific cultural significance for Māori
* ensure that information resources and education sessions are culturally appropriate and delivered in a manner that takes account of Māori cultural values and beliefs, and
* consult and include Māori in the Service’s planning and delivery.

#### 4. Service Users

The Service Users are:

* pregnant women, expectant fathers / partners, parents of new babies including adoptive parents and, where appropriate, their whānau
* relevant health, education and social service providers who access the Information Component of the Service.

Education Services are available for all parents, but focus on meet the needs of first time parents and groups with high needs, such as: young / teenage parents, Māori, Pacific Peoples, Asian and parents with limited comprehension of the English language.

#### 5. Access

**5.1 General**

Access to the Education Service is via self-referral or referral from a registered health professional or from other health, education or social services or from community groups.

The Education Service will be provided at times and duration that meet the needs of the Service Users as agreed between the funder and Education Service provider, and may include weeknights and weekends.

* 1. **Education Service** **Referral Process**

The Education Service provider will:

* provide an electronic registration process to the appropriate Education Service for referrals from both other service providers / agencies and self-referrals
* register parents, and ensure the parent is registered with an appropriate Education Service or provided with details of how to access the Information Component of the Service and other pregnancy and parenting related services
* provide effective two way communication (including text messaging) and follow up all referrals received
* include an outreach recruitment approach in communities to improve access to the Service as needed.

**5.3 Exit Criteria**

The Education Service will provide information and education to parents throughout pregnancy and following birth until the newborn child is six weeks old. Prior to the birth and exiting the Service, parents will be provided with information on how to enrol and access ongoing child health and parenting services in their area.

#### 6. Service Components

**6.1 Information Component**

The Information Component provides a directory of pregnancy and parenting related services within each DHB or region and is linked to the website under Your Health entitled Pregnancy & Kids[[8]](#footnote-8).

The Information Component Service provider will:

* use existing community maternity or child health service structures as the conduit for the pregnancy and parenting information and resources, and/or advise other health, education and social service providers in their area about the Information Component and how to access it for their clients.
* integrate information with other services being delivered in the community to ensure improved accessibility for their contracted population
* provide access to and/or distributing this information to all parents across their contracted population
* maintain the currency of DHB / Regional information and resources.

**6.2 Education Service Component**

***Group education programmes***

The Education Service provider will deliver group-based education programmes on pregnancy, childbirth and early parenting.

The needs of the Service Users in relation to timing of services will be assessed locally and detailed by the Education Service provider in their Service Plan.

Each education programme will:

* be provided for a minimum of a total of 12 hours, over a number of sessions throughout pregnancy and, as appropriate, until the newborn child is six weeks old
* be developed with their community and designed to meet the needs of the individual parents, including consideration of specific programmes for different groups of parents eg. young / teenage parents, Māori, Pacific, Asian, and parents with limited comprehension of the English language
* include participants at a similar stage in their pregnancy, where possible
* use a health literacy approach that supports and enhances the parents’ confidence to make informed decisions throughout pregnancy, childbirth and parenting, and
* reflect evidence-based best practice, apply principles of respectful and non-blaming communication, and be delivered in a spirit of partnership between the facilitator and Service Users.

The Service provider will draw from the Key Messages outlined in Appendix 1 when designing the content to be delivered in any education programme. In addition to delivery of the education content, Service Users accessing the Education Service will be:

* advised about the Information Component and how to access it, and
* encouraged to exchange contact details and form ongoing informal postnatal support groups.

***Block or one-off education sessions***

As considered necessary[[9]](#footnote-9), the Service provider may deliver block, one-off or drop-in education sessions on individual topics or modules for Service Users who would otherwise not attend the group education programmes. The need for these sessions will be outlined in the Service Plan and agreed between the Education Service provider and funder.

#### 6.3 Settings

***Information Component***

The Information Components will be delivered through websites, social media applications, telephone and electronic/text message services and provision of information resources to parents through community hubs, family centres and other health, education or social service providers.

***Education Service***

The Education Service will be delivered to Service Users from appropriate community-based venues, such as youth hubs, teen parent units, social service hubs, marae, churches, community clinics or halls etc.

Appropriate community-based venues are identified by consideration of accessibility, co-location or linkages with other services beneficial for current and potential Service Users and consultation when developing the Service Plan.

## Resources

***Information Component***

The website Your Health, Pregnancy & Kids is maintained by the Ministry of Health. DHB/Regional Information and Resources will be published and maintained by the DHB/Region and/or Information Component Service provider and linked to the Pregnancy & Kids component.

These resources must reflect current evidence and best-practice in relation to their topic. The range of resource types include web information, brochures, telephone / text message services, video clips etc.

***Education Service***

Education Service providers are required to compile resources from the Information Components and other sources to inform the content for the Education Service and/or be delivered to Service Users. Resources accessed from outside the Information Components must reflect current evidence and best practice, be relevant for the situation and audience, and be consistent with the advice provided through the Information Components and other health providers

The use of advertising, sample products and discount vouchers will be at the discretion of the Education Service provider in agreement with the DHB. Such resources must not contradict any of the Key Messages of the Service.

In accordance with the Baby Friendly Hospital Initiative (BFHI), resources that advertise or promote infant formula will not be given to Service Users.

#### 7 Service Linkages

The Information and Education Service providers will be able to demonstrate knowledge of and appropriate relationships with the following service providers in their area:

* Lead Maternity Carers (LMCs) and other local health care providers including Well Child / Tamariki Ora (WCTO) nurses, General Practitioners (GPs) and practice nurses, Nurse Practitioners, Primary Health Organisations (PHOs), public health nurses, Māori health providers, Pacific Peoples health providers
* teen parent units, family centres eg. Plunket
* local providers of social and community services, eg. local schools, Non-Government Organisations (NGOs) social service providers and the Ministry of Social Development and Child and Youth and Family
* local maternity facilities, neonatal and paediatric units
* physiotherapists
* Public Health Unit activities and other public health programmes for Well Child health, Māori health promotion, parenting, nutrition, immunisation, Sudden Unexpected Death in Infancy (SUDI)
* smoking cessation service providers
* prevention of family violence service providers and networks
* relationship service providers
* housing and social services organisations and services, including Family Start
* specialist health and mental health services, particularly perinatal mental health services
* primary and community mental health service providers
* providers of evidence based parenting education programmes for older children in the family (Triple P and Incredible Years)
* community oral health and dental outpatient services
* other relevant NGO, Māori and Pacific service providers
* other Whanau Ora programme providers.

### 8. Quality Requirements

**8.1 General**

The Service must comply with the Provider Quality Standards described in the Operational Policy Framework[[10]](#footnote-10) or, as applicable, Crown Funding Agreement Variations, contracts or service level agreements.

**8.2 Information Component**

The Information Service provider will work with relevant health, education and social service providers to facilitate how they and their Service Users may best access the Information Component of the Service.

The following access and acceptability quality requirements apply:

* information is available to Service Users at all times and written in language that is easily understood by the reader[[11]](#footnote-11)
* information is culturally appropriate for the varied groups of Service Users and are available in a range of languages
* resources are current, and use communication methods and technology most appropriate to each audience
* assessment of the Service accessibility and acceptability is routinely undertaken through surveys of Service Users and local maternity service providers, and measures taken to address barriers to access.

**8.3 Education Service**

The Service will improve its access and acceptability for Service Users, by:

* responding to the individual needs of the Service Users while meeting the service component requirements in clause 6.2 above
* acknowledging different life situations and needs of Service Users to encourage their participation and completion of the programme
* considering education needs of fathers / partners
* ensuring the Service and information is culturally appropriate, safe and upholds the principles of the Treaty of Waitangi.

Acceptability is assessed by Service User participation in on-going evaluation of the Service, and feedback contained in annual surveys to assess their satisfaction with:

* the quality and outcome of services they received
* the appropriate level of information provided on their care or support service
* their level of involvement in the planning and delivery of their care, including their transition into and discharge from the service
* how well their cultural and linguistic needs were recognised and met, and
* timeliness of information and education received.

**8.4 Education Service Facilitation**

The educators / course facilitators who run the group education programmes / sessions will:

* have knowledge, skills and experience in the maternity and early childhood areas
* have completed or be working towards a recognised qualification in Childbirth Education
* have completed or be working towards a recognised qualification in Adult Education or Childbirth Education or have a demonstrated ability to facilitate group education
* meet and maintain the required competencies (see Appendix 2)
* have strong links with the communities of the parents and other service providers within these communities

Training and professional development must be provided to enable educators / facilitators to maintain the required competencies.

Each Education Service group programme will ideally be co-ordinated by one person (the educator / facilitator). Guest speakers, other parents and pregnancy and parenting experts will also to contribute as appropriate.

**9. Purchase Units and Reporting Requirements**

**9.1 Purchase Units**

Purchase Units are defined in the joint DHB and Ministry’s Nationwide Service Framework Purchase Unit Data Dictionary. The following Purchase Units apply to this Service.

| **PU Code** | **PU Description** | **PU Definition** | **PU Unit of Measure** |
| --- | --- | --- | --- |
| W01010 | Pregnancy and Parenting - Information  | Pregnancy and parenting information service and resources | Service |
| W01011  | Pregnancy and Parenting - Education  | Pregnancy and parenting education programme for pregnant women and their partners, and adoptive parents. | Client |

|  |  |
| --- | --- |
| **Unit of Measure** | **Unit of Measure Definition**  |
| Client | Number of clients managed by the service in the reporting period i.e. caseload at the beginning of the six month reporting period plus all new cases in the period. 'Client' and 'Service user' are interchangeable.For the purposes of reporting for this service specification a ‘Client’ is a pregnant woman or adoptive parent who has registered for the Education Service. |
| Service | Service purchased in a block arrangement uniquely agreed between the parties to the agreement |

##### **9.2 Reporting Requirements**

The six monthly reports are due by: 20 January and 20 July. The information will be used for comparison and monitoring service performance.

The reporting requirements as detailed in the table below (except for NNPAC reporting) should be forwarded to:

The Performance Reporting Team, Sector Operations

Ministry of Health

Private Bag1942

Dunedin 9054.

Email performance\_reporting@moh.govt.nz.

Details of any additional information collected and frequency of reporting to Sector Operations are as specified by the Funder and documented in the Provider Specific Schedule of the contract.

*Note National Non- Admitted Patient Collection (NNPAC) reporting:* The DHB will report W01011 Pregnancy and Parenting Education purchase unit code to NNPAC (including the Education Service User’s National Health Index (NHI) number of each client (as defined in 9.1) and the start date and end date of their Education programme (as defined in 6.2) one month after the end of each service providers’ report due date period.

| **Purchase Unit** | **Frequency** | **Reporting Requirement** |
| --- | --- | --- |
| W01011 Pregnancy and Parenting Education Service | 6 Monthly | Total number of Group Education Programmes (as defined in 6.2) held in the reporting period. |  |
| Total number of completed Block/One Off Education Sessions (as defined in 6.2) held in the reporting period ending 31 December, 30 June. |  |
| Total number of clients (existing clients, plus all new cases) who were registered in the six monthly reporting period. |  |
| Total number of clients (existing clients, plus all new cases) who were first time parents registered in the six monthly reporting period. |  |
| Total number of clients aged 20 and under (existing clients, plus all new cases) who were registered in the reporting period. |  |
| Total number of clients (existing clients, plus all new cases) who completed at least 75 per cent of the programme in the reporting period. |  |
| W01011 | 6 Monthly | **Narrative Report**A brief narrative report outlining highlights, risks or issues identified during the reporting period against the services outlined in this service specification and agreed in the Service Plan. |
| W01010Pregnancy and Parenting - Information | 6 Monthly | **Narrative Report**A brief narrative report outlining highlights, risks or issues identified during the reporting period against the services outlined in this service specification and agreed in the Service Plan. |

Other service reporting requirements may be added as part of DHB-provider contracts.

**10. Service Planning**

All Service providers will participate in a local area needs assessment of new parents and complete an annual Service Plan that addresses the identified needs of the Service Users.

The Service Plan will outline the proposed Information Components and / or Education Services for consultation and agreement with the funder, including:

* access and Registration process – including ways to promote the Service to attract registration from priority groups of parents
* capacity of the Service – expected numbers of first time parents and those from high needs groups and projected number of Education Service programmes and sessions required
* service streams/formats – eg. web information, community hub / centre information, group programme, one-off / drop-in sessions
* service types – outline specific service designs for eg. young / teenage parents, new fathers, Māori, Pacific Peoples, parents with limited English
* timing of service – proposed timing of services during pregnancy and / or postnatally, length of sessions and time of day/week for delivery
* settings for the Service – proposed venues including linkages with other related services and familiarity for high priority parents
* service linkages and referral pathways – with referring organisation providers and providers of ongoing health services and appropriate postnatal parenting and peer support groups
* professional development and training for educators / facilitators – including core training, conferences, peer support and access to expertise required to maintain required competencies and quality requirements in clause 8.3.

Appendix 1

#### Key Messages

The following key messages form the minimum content that must be available to Service Users via the Information Components and / or Education Service.

The inclusion and emphasis placed on each of the key messages and any additional related content in the Education Service will be determined based on the needs of the different groups of parents.

|  |  |
| --- | --- |
| **Topic** | **Key Messages** |
| ***Pregnancy*** |
| Access to maternity services | Provide information on accessing Lead Maternity Carers (LMC) and other key maternity services throughout pregnancy including information on roles of different service providers, availability, location/timing, and eligibility criteria. |
| Lifestyle choices during pregnancy – alcohol, tobacco | Refer to the Ministry of Health’s (The Ministry’s) advice on avoidance of alcohol, tobacco and other drugs for pregnant women and the Smoking Cessation Guidelines structured around the ABC (Ask, Brief Advice and Cessation Support) memory aid; and immunisation during pregnancy. |
| Nutrition and physical activity through pregnancy  | Advice on healthy and safe nutrition during pregnancy including supplements, optimal weight gain and physical activity and on the importance of maintaining oral health during pregnancy. Refer to the Ministry’s resources on supplements, food safety, healthy weight gain, and food and nutrition guidelines for healthy pregnant and breastfeeding women. |
| Screening, scans and other services during pregnancy | Provide information for parents to make informed choices about these services. Refer to the National Screening Unit’s advice on antenatal screening. |
| Preparing for parenthood | Acknowledging the relationship between parents / partners and the changes that may occur when the baby arrives.Safety and key equipment considerations for baby including car seat, bassinette/cot, first aid including resuscitation, Sudden Unexpected Death in Infancy (SUDI) prevention and Safe Sleep messages.Acknowledging maternal and paternal mental health including antenatal anxiety, stress, depression/lowered mood and who is available to help.Information on where to seek advice on pregnancy / breast feeding and medication for those on psychotropic medications including additional mental health support during the perinatal period for women with pre-existing or historical mental health issues.Financial and budgeting information including paid parental leave, Inland Revenue Department / Working for Families entitlements and benefits. |
| Preparing for labour and birth | Information to assist the pregnant women and father / partner to prepare for labour and birth including healthy exercise, warning signs during pregnancy and what to pack for a birthing unit/hospital birth or to prepare for a home birth. |
| **Topic** | **Key Messages** |
| ***Labour and childbirth*** |
| Stages of labour, coping strategies and considerations and choices for pain management | Including information on the signs and stages of labour, self-help measures and coping strategies before and during labour, pain management options for labour (non-pharmaceutical and pharmaceutical) and the role of the LMC, father / partner and support person / people. |
| The childbirth experience | Acknowledging the parents’ desires for the childbirth experience, building confidence in approaching childbirth and their ability to make informed decisions about the labour and birth care they receive.Options for location of the birth (home, primary birthing unit, hospital) including expectations before, during and after birth and a tour (physical or virtual) of the local DHB facilities.Common complications that can be experienced during labour and childbirth and possible interventions options.Sharing real-life experiences of labour and birth by parents who have recently had a baby. |
| ***Early parenting and child health*** |
| Adjusting in the early postnatal period  | Provide information on physical and emotional changes, including postnatal depression for the mother and father, and self-care and support for the woman and father / partner postnatally.Inclusion of real-life experiences from parents who have recently had babies to provide practical information on the days following the birth and with a baby. |
| Newborn services including screening and Vitamin K prophylaxis | Provide information on services and assessments of newborns including Vitamin K prophylaxis, newborn metabolic and hearing screening. Refer to the National Screening Unit’s website[[12]](#footnote-12) for information on newborn screening. |
| Breastfeeding | Provide information to support establishing and maintaining breastfeeding including breastfeeding benefits, skin to skin contact, rooming in, ways to improve latching and milk supply, (including recognising cluster feeding patterns by infants and growth spurts), management of complications, availability of breastfeeding support services / lactation consultants, roles for fathers / partners and the importance of exclusively breastfeeding for around the first six months[[13]](#footnote-13). Refer to the Ministry’s resources on breastfeeding and guidelines on healthy nutrition for breastfeeding women[[14]](#footnote-14). |
| **Topic** | **Key Messages** |
| ***Early parenting and child health continued*** |
| Early child bonding, development and parenting | Provide information to support mums and dads to develop warm, sensitive bonding relationships with their baby including the importance of skin to skin contact, the interactive cues to develop bonding between parents and infants, the relationship between bonding and common infant concerns such as poor feeding, difficult to settle / poor sleeping or excessive crying and the availability of services to support new parents.Practical information on early baby care including settling to sleep, bathing, clothing, bedding including safety considerations.Information on normal infant development covering the range of milestones to support realistic / accurate developmental expectations, including shaken baby prevention messages.Provide information on accessing ongoing parent support services including Family Start, Support for Mothers and their Pepi and Parents as First Teachers (PAFT). |
| Newborn enrolment in GP and WCTO services and early enrolment to other early childhood services | Provide information on the key universal health services available for children and families (General Practitioner (GP) / Primary Healthcare Organisation (PHO) and WCTO services) and the importance of enrolling in these services as soon as possible following the birth. Refer to the Ministry’s information on the newborn multiple enrolment initiative. Provide advice on other services available and the benefits to enrolling early including oral health services and early childhood education. |
| Immunisation | Provide information to support parents making informed decisions about immunising their baby including the immunisations on the current National Immunisation Schedule and the diseases they protect against, the importance of early and on-time immunisation for protecting young infants, and evidence-based and best-practice advice to address any concerns about immunisations or side-effects. Refer to the Ministry’s information on Immunisations for the current Immunisation Schedule, and evidence and best-practice for providing immunisation information. |
| National Immunisation Register (NIR) | Provide information about the NIR, (the database that holds the immunisation details of New Zealand children) including:* what information is kept on the register
* who has access to the information, and
* why it is important for authorised health professionals to have access to a child’s immunisation details and the opt-off system if parents choose not to have details of their child’s immunisations recorded on the register.
 |

**Appendix 2 -** **Competencies for Pregnancy & Parenting Educators/Facilitators**

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| --- | --- |
| **Area of practice** | **Recommended requirement/action** |
| Facilitation style - promotes an acceptable environment for different groups of parents to engage | Educators need to consider:* their own personal values, beliefs, culture, religion and biases, and their potential impact on their practice
* different strategies they can use to responding to sensitive issues in a respectful and appropriate way
* the social, cultural, emotional, physiological, psychological needs of parents
* each individual’s experience and health is influenced by multiple social determinants

Educators need to demonstrate and/or provide evidence of:* verbal and non-verbal language that is consistent and appropriate
* identifying target group/populations in their community
* ongoing needs analysis to identify gaps in service delivery and/or content
* using sensitive responses to complex social issues and media influences
* building rapport and group safety with group agreements at beginning of programme (i.e. different ages, belief systems, decision-making)
* creating opportunities for group socialisation and networks between consumers after the formal sessions are complete
* promoting development of adaptive strategies and resources to participants in response to unexpected events
 |
| Facilitation style - reflects best-practice principles of adult education  | Educators need to consider:* key principles of adult learning and group facilitation
* strengths and roles of group members to assist learning

Educators need to demonstrate and / or provide evidence of:* completion or working towards a recognised qualification in Adult and/or Childbirth Education or the ability to provide group education
* how they have integrated key principles of adult education into their practice
* engaging consumers in a range of learning activities
* using innovative strategies to identify the specific learning needs of participants
* adapting practice to meet specific consumer needs and learner characteristics
 |
| Facilitation style - inclusive of all parents including fathers/partners/support person | Educators need to consider:* emphasising the important role that the parenting partnership and wider family/whānau plays in determining outcomes for parents and children, and
* using language that is sensitive and normalises the birth and early parenting experience for both mother and father/partner/support person

Educators need to demonstrate and/or provide evidence of:* acknowledging the equal role of mother and partner as parents, and where educational needs are different (including content, style of delivery)
* discussing the central and important role that fathers play in supporting mothers during pregnancy, birth and the postnatal period
* emphasising positive benefits of fathers engaging in their children’s lives from birth onwards
 |

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| --- | --- |
| **Area of practice** | **Recommended requirement/action** |
| Course content is consistent with other maternity providers and evidence-based information that meets Ministry of Health standards | Educators need to consider:* own knowledge base and scope of practice, and ability to recognise when evidence is insufficient to accurately inform practice
* transparency around personal biases and health sector priorities, and tools to deal with difficult questions and situations
* role as a resource person, referring to other sources of information

Educators need to demonstrate and/or provide evidence of:* skills in retrieving and understanding research, including evidence and different levels of enquiry
* application of evidence in education service, integrating research and/or different disciplines to meet the health and/or educational needs of consumers
* collaboration with other health care providers when service is outside their scope of practice
* using existing curriculum and policy directives where relevant
* adapting course content and curriculum to current priorities, programmes and parallel services in their community (ie. SUDI, safe sleep, timely delivery of immunisation information during outbreaks)
 |
| Course content is available via a range of media and is technologically up to date | Educators need to consider:* using a range of technology, teaching aids and learning activities to meet variable learning needs, learning styles and learner characteristics
* staying current with technology, especially where using video/DVD resources as educational tools
 |
| Linkage with other services and support | Educators need to consider:* the benefits of being an active and co-operative member of a multidisciplinary team
* initiating and maintaining effective liaison with other agencies/groups
* building rapport and trust in client-professional and inter-professional relationships

Educators need to demonstrate and/or provide evidence of:* formal networking activities with essential service linkages to promote awareness and access to the Service
* active referral pathways and information transfer protocols with essential service linkages
 |
| Regular peer review and quality improvement | Educators need to consider:* own strengths and actively seek to inform gaps in knowledge base and facilitation skills
* staying in touch with emerging social trends and research

Educators need to demonstrate and/or provide evidence of:* active involvement in continuing professional development
* regular self-evaluation and reflective practice
* regular performance review for own and organisational practice
* taking action as a result of review, or a change in practice where appropriate,
* participating in regular mentoring, peer support and/or clinical supervision for quality improvement
* seeking opportunities for multidisciplinary training and professional development with midwives, LMCs, Plunket, WCTO nurses, Family Start etc
 |

1. https://www.health.govt.nz/your-health/pregnancy-and-kids [↑](#footnote-ref-1)
2. http://www.health.govt.nz/publication/section-88-primary-maternity-services-notice-2007 [↑](#footnote-ref-2)
3. http://www.health.govt.nz/our-work/life-stages/child-health/well-child-services/well-child-publications [↑](#footnote-ref-3)
4. http://www.health.govt.nz/our-work/preventative-health-wellness/immunisation/new-zealand-immunisation-schedule [↑](#footnote-ref-4)
5. http://www.health.govt.nz/publication/immunisation-handbook-2011 [↑](#footnote-ref-5)
6. Service Coverage Schedule describes the agreed level of service coverage for which the Ministry and DHBs are held accountable. It is updated annually and published on http://www.nsfl.health.govt.nz/apps/nsfl.nsf/menumh/Accountability+Documents [↑](#footnote-ref-6)
7. Family Start is an intensive support/co-ordination programme for high needs women and families run by the Ministry of Social Development MSD. Family Start begins antenatally, targets high needs women, infants and their families in high need communities. [↑](#footnote-ref-7)
8. National Information – The Ministry of Health (the Ministry) maintains a list of endorsed resources and web links for the Service provider to refer their clients. https://www.health.govt.nz/your-health/pregnancy-and-kids [↑](#footnote-ref-8)
9. While best practice in delivering adult education is to provide services through a programme of sessions, some parents may not require or be able to commit to a full education programme. [↑](#footnote-ref-9)
10. The Operational Policy Framework is updated annually and is published on the Nationwide Service Framework Library website http://www.nsfl.health.govt.nz/apps/nsfl.nsf/pagesmh/506 [↑](#footnote-ref-10)
11. Refer to the Ministry of Health’s Parent Information Project Report for details on health literacy and reading levels appropriate for parents. [↑](#footnote-ref-11)
12. National Screening Unit website: https://www.nsu.govt.nz/ [↑](#footnote-ref-12)
13. The course content must comply with the Baby Friendly Hospital Initiative (BFHI). The BFHI guidelines must be implemented with care and sensitivity from the educator, particularly those aspects relating to not providing group instruction about the use of infant formula. This information may be provided at the request of parents on an individual basis. Educators/facilitators need to be aware of the Health Workers Code <http://www.health.govt.nz/our-work/who-code-nz/code-practice-health-workers> which is part of the ‘Code in New Zealand’ <http://www.health.govt.nz/our-work/who-code-nz>. [↑](#footnote-ref-13)
14. http://www.health.govt.nz/your-health/healthy-living/babies-and-toddlers/breastfeeding-0 [↑](#footnote-ref-14)