Purpose:

There is strong evidence to suggest that the start of an infant’s life determines the foundation of all future learning, behaviour, and health (Centre on the Developing Child, 2007). Studies in neuroscience confirm that the first five years last a lifetime and that the best brain development occurs when children are cared for within nurturing relationships (Winter, 2010). Further, the start of life is especially important for many aspects of good health and wellbeing in later adulthood (Wadsworth & Kuh, 2011). Nurturing early childhood experiences are known to build the foundation for a skilled workforce, a responsible community, and a thriving economy (Centre on the Developing Child, 2007). In Australia, maternal, child and family health nurses (MCaFHNs) are the primary workforce tasked with provision of primary health care services to support parents to optimise their children’s growth and development potential (Schmied et al., 2014; Rossiter et al., 2017).

The Commonwealth of Australia is comprised of six states and two territories. Each jurisdiction has developed well child, health care independently, with differing scope of maternal, child and family health nursing practice, differing educational requirements and resultant quality measures (Kruske & Grant, 2012). As such, there is no consistent definition of MCaFHN practice in Australia and a lack of research that explicitly or comprehensively describes the role of the MCaFHN (Fraser, Grant, & Mannix, 2016). This presentation showcases research that attends to this gap by developing evidence informed standards for MCaFHN practice in Australia.

Methods:

Undertaken in three stages, the research used Puddy and Wilkins’ (2011) continuum of evidence effectiveness to frame the research design. This enabled explicit inclusion of experiential and contextual evidence alongside the best available research evidence. Ethical approvals were received from Flinders University in South Australia and Griffith University in Queensland. The research was funded by Maternal, Child and Family Health Nurses Australia, competitive grant funding from Flinders University and industry funding from Gymbaroo Australia.

In stage one, all existing state and territory standards and competency documents (N=8) were thematically analysed into 19 categories. These were then synthesised further into five domains, each with three to four practice categories. A workshop was held with a national panel of industry and academic experts. Here, the draft was critiqued to incorporate findings from a review of the international literature (Fraser, Grant, & Mannix, 2014) and reconstructed in relation to the contemporary contexts of the panels’ experience. This resulted in re-clustering the findings into four domains each with between two and five statements incorporating between three and 11 practice cues.

This draft was distributed for broad consultation with industry, consumers and key stakeholders via a qualitative online survey in stage two. The resultant 452 full responses were analysed and results incorporated into a final draft. The final draft included seven standards each with between six and 27 cues. Stage three saw the draft distributed widely to Australian maternal, child and family health nurses as a modified Delhi survey.
Results:

The final survey resulted in 170 full responses in the first round of the Delphi survey with an average of 97.8% agreement. Where a 75% rate of agreement results in acceptance of a statement in Delphi survey technique (Keeny, McKenna, & Hasson 2011), 97.8% agreement in the first round attests to the rigor of the study design. We attribute this to iterative stages of consultation and knowledge generation with wide ranging participant groups of industry, consumers and key stakeholders.

Conclusion:

The National Standards of Practice for Maternal, Child and Family Health Nurses in Australia (Grant, Mitchell, & Cuthbertson, 2017) are now being incorporated into education and practice across Australia. Linking explicitly to the Registered Nurse (RN) Standards of Practice (NMBA, 2016), they provide a much needed framework for RNs transitioning through advanced practice to Nurse Practitioner roles. Further, they enable jurisdictional service providers and educators to benchmark quality and safety for maternal child and family health nursing across Australia.

Title:

Developing National Standards of Practice for Maternal, Child, and Family Health Nurses in Australia

Keywords:

Delphi technique, maternal and child health and standards

References:


Nursing and Midwifery Board of Australia, (2016). *Registered Nurse Standards for Practice*, Melbourne: Nursing and Midwifery Board of Australia.


**Abstract Summary:**
This presentation details the iterative process of using experiential and contextual evidence alongside the best available research evidence to co-create national standards of practice for maternal, child and family health nurses in Australia.

**Content Outline:**

There is strong evidence to suggest that the start of an infant’s life determines the foundation of all future learning, behaviour, and health (Centre on the Developing Child, 2007). Studies in neuroscience confirm that the first five years last a lifetime and that the best brain development occurs when children are cared for within nurturing relationships (Winter, 2010). Further, the start of life is especially important for many aspects of good health and wellbeing in later adulthood (Wadsworth & Kuh, 2011). Nurturing early childhood experiences are known to build the foundation for a skilled workforce, a responsible community, and a thriving economy (Centre on the Developing Child, 2007). In Australia, maternal, child and family health nurses (MCaFHNs) are the primary workforce tasked with provision of primary health care services to support parents to optimise their children’s growth and development potential (Schmied et al., 2014; Rossiter et al., 2017).

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This presentation showcases research that attends to this gap by developing evidence informed standards for MCaFHN practice in Australia. Undertaken in three stages, the research used Puddy and Wilkins’ (2011) continuum of evidence effectiveness to frame the research design. This enabled explicit inclusion of experiential and contextual evidence alongside the best available research evidence. Ethical approvals were received from Flinders University in South Australia and Griffith University in Queensland. The research was funded by Maternal, Child and Family Health Nurses Australia, competitive grant funding from Flinders University and industry funding from Gymbaroo Australia.

In stage one, all existing state and territory standards and competency documents (N=8) were thematically analysed into 19 categories. These were then synthesised further into five domains, each with three to four practice categories. A workshop was held with a national panel of industry and academic experts. Here the draft was critiqued to incorporate findings from a review of the international literature (Fraser, Grant, & Mannix, 2014) and reconstructed in relation to the contemporary contexts of the panels’ experience. This resulted in re-clustering the findings into four domains each with between two and five statements incorporating between three and 11 practice cues.

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and educators to benchmark quality and safety for maternal child and family health nursing across Australia.

First Primary Presenting Author

Primary Presenting Author

Julian Maree Grant, PhD

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Professional Experience: I am a Registered Nurse with post graduate qualifications in paediatric and community child health nursing. I have worked in rural, remote and metropolitan regions in Australia with children and families since 1990. Since 2004 I have turned my attention to researching with families where children are rendered vulnerable due to race and ethnicity to improve outcomes for children. Most recently this has included researching with the early childhood workforce to improve practice.

Author Summary: Julian is a Registered Nurse who has worked in paediatric and community child health nursing since 1990. She has worked in a range of practice environments and developed a passion for equity in child health. She now researches with families where children are rendered vulnerable due to race and ethnicity to improve outcomes for children. Most recently this has included researching with the early childhood nursing and interdisciplinary workforce to improve practice.

Second Secondary Presenting Author

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Professional Experience: Creina Mitchell is the Bachelor of Nursing (BN) Deputy Program Director at the Gold Coast campus of the School of Nursing and Midwifery. Prior to entering the higher education sector, Creina worked in hospital, local government, state government and research environments; predominately in areas related to maternal and child health.

Author Summary: Creina’s research interests include maternal and child health, immunisation and community health. Her methodological interests include randomised trials, data management, quantitative research and survey methods. Creina has published in peer reviewed journals and presented findings from her collaborative research at national and international conferences.