



# **LOGAN COMMUNITY MATERNAL AND CHILD HEALTH HUBS**

**VISION AND INVESTMENT PROSPECTUS**

This video shows the importance of the Village Connect Hub for the Maori and Pasifika community in Logan



 Watch

**I COME FROM A BIG FAMILY AND A STRONG COMMUNITY BACK IN NEW ZEALAND. NOW THERE IS A COMMUNITY HERE. I FEEL CULTURALLY SAFE AND ABLE TO BRING FAMILY INTO MY APPOINTMENTS. IT TAKES A VILLAGE TO RAISE A CHILD AND TO LEARN FROM EACH OTHER.**




# ACROSS LOGAN CITY, OUR CHILDREN MATTER.

The Logan community is resourceful and resilient, underpinned by strong culture and deep community ties. Over years, though, our diverse community has also experienced the compounding effects of wide-spread intergenerational challenge; much of which can be traced to inequity during the earliest years of life. Research is clear<sup>1</sup> that the first 1000 days of life, beginning in pregnancy, establish the patterns for future life outcomes. Sadly, the cost of getting this wrong has had profound implications for both the health system and for the families of Logan over decades.

Holistic family-centred care can provide hope. International evidence<sup>2</sup> reveals the benefits of midwifery continuity of care as having a positive effect on every health outcome for mothers and babies, including reducing pre-term birth. However, while early up-take of antenatal care typically provides opportunity and hope for young lives, in 2015, women in the Logan region had one of the lowest rates of antenatal attendance across Queensland and were far less likely to engage with mainstream health services. When consulted, community members identified a need for improved relationships with care providers, cultural safety, holistic engagement, and support to address practical barriers to accessing healthcare.

<sup>1</sup> McKenzie, F. & DaCosta, R Early Childhood Development in Australia: challenging the system

<sup>2</sup> Allen, J, Gibbons, K, Beckmann, M, Tray, M, Stapleton, H, & Kildea, S (2015). Does model of maternity care make a difference to birth outcomes for young women? A retrospective cohort study. *International Journal of Nursing Studies*, 52.



**“I DIDN’T HEAR ANYTHING AFTERWARDS, NO ONE ASKED HOW I WAS DOING OR OFFERED ANY SUPPORT. IT TOOK MORE THAN 3 YEARS BEFORE I THOUGHT I COULD HAVE ANOTHER BABY AGAIN” (AFTER A TRAUMATIC BIRTH WITHIN THE MAINSTREAM SYSTEM).**

**BY 2015 DISTRESSING INSTANCES OF COMPROMISED BABIES AND WOMEN PRECIPITATED A COMPELLING ARGUMENT FOR CHANGE IN LOGAN.**

A movement to reimagine possibilities commenced and community increasingly stood strong to shape the and opportunities that would best position their youngest children for a bright future. The challenge was to design a culturally safe and highly effective continuity of care model co-created by community; a model that would be sustainable into the long-term future. The response would generate a social model, rather than a medical model of health care provision.

With a strong community heart and diligent and aligned commitment from Logan health services, the Logan Community Maternal and Child Health Hubs emerged. The Hubs provide a community-led, place-based response based on strong cultural values. And they work.

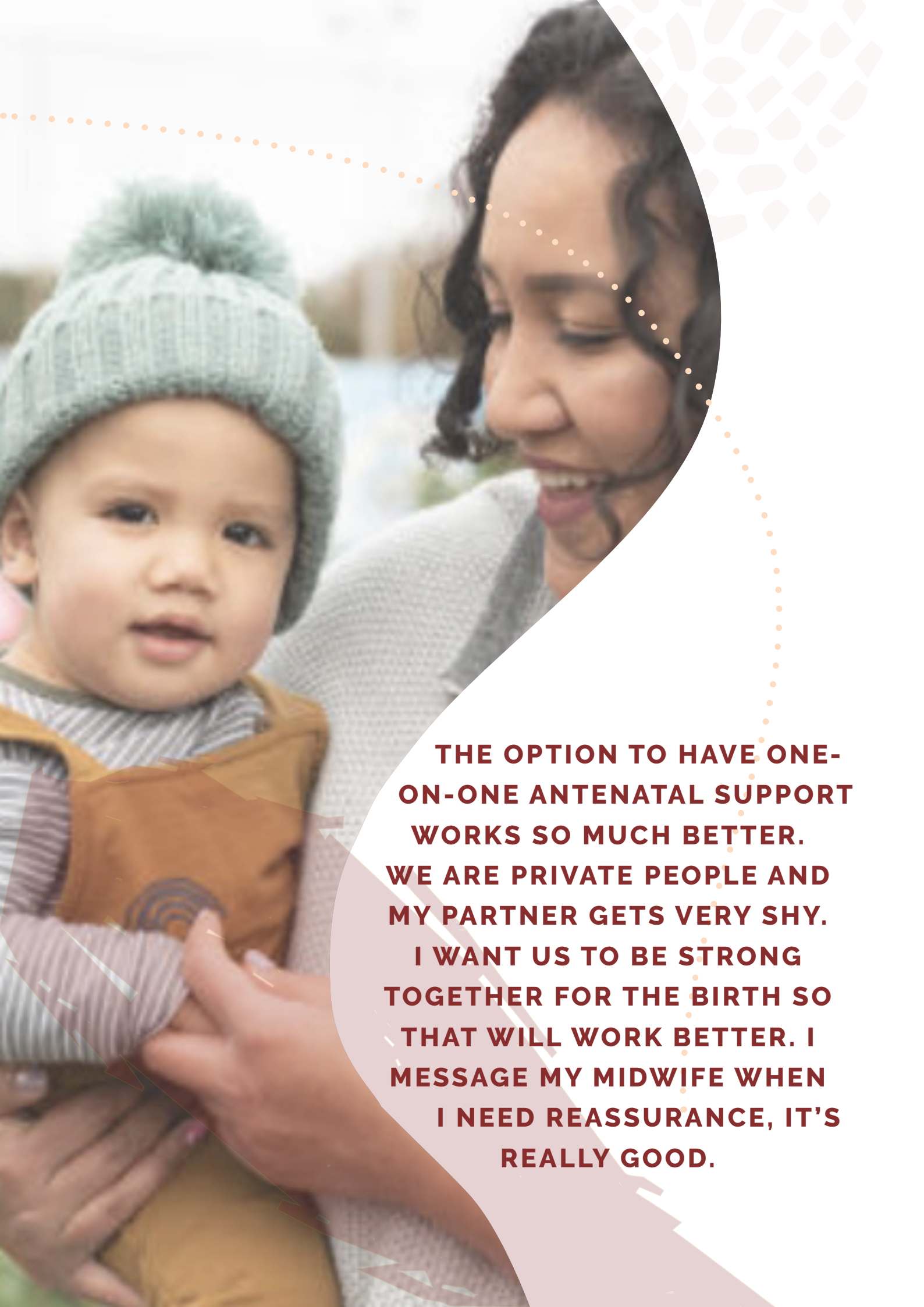
## **ADDRESSING THE GAPS**

Mums in Logan have been clear that they want to be able to engage with their birth care in culturally appropriate localised settings. They articulate a preference to address immediate needs and emerging needs, with wrap-around support in real time. These priorities are not privileges; they are basic human rights.

To address these needs, the Hubs have worked to address the gaps in the system which have led to poor health outcomes in the past.

The prevailing health system had not been able to deliver on its key performance indicators, leading to the appetite and energy to consider a new way of working – going beyond service improvement to become family focused. The unique approach has involved community in identifying the problem and making the shift to a new solution. The Hubs represent ‘Lighthouse’ partnerships, offering a demonstration of how we might more broadly lift-up and value culture and respect to a critical point of difference from the mainstream birthing care in Logan. The services are actively listening, and in doing so, are closer to the people they serve.





**THE OPTION TO HAVE ONE-ON-ONE ANTENATAL SUPPORT WORKS SO MUCH BETTER. WE ARE PRIVATE PEOPLE AND MY PARTNER GETS VERY SHY. I WANT US TO BE STRONG TOGETHER FOR THE BIRTH SO THAT WILL WORK BETTER. I MESSAGE MY MIDWIFE WHEN I NEED REASSURANCE, IT'S REALLY GOOD.**

# UNIQUELY LOGAN

A Logan co-design process involving 500 women from diverse backgrounds, and over 20 organisations, was supported by a Collective Impact effort, Logan Together, to build the conditions for change. Significant advocacy effort secured funds to start up a unique model of Logan Community Maternal and Child Health Hubs.

At its heart, this model required; personalised continuity of care; relationship based care plans developed with the mother and integrated with other support services to address wider psychosocial support needs.

## Elements of the Hubs included:

- Midwifery Group Practice providing continuity of midwifery care until at least 6 weeks postpartum
- Informed choice for women across pregnancy, labour, and birth and postpartum
- Inclusion of family and community
- Provision for home visits
- Flexible scheduling, accommodating the needs of mother and other siblings
- Midwifery care embedded within community organisations providing wrap-around support and welcoming spaces that were already known and regarded by specific vulnerable groups
- Partnership with other community services including Child Health Queensland
- A shared governance model and shared commitment of all partners to this social model of care.

Four Hubs have emerged, each one unique to community. The success of these hubs lies is augmented by the community connectors who are with expecting mothers throughout pregnancy and into the early stages of life with their new baby.

### Village Connect

Based in Slacks Creek, led by members of the Logan Pasifika and Maori community.

### The Benevolent Society Browns Plains

Based in the Browns Plains Early Years Centre focusing on mothers 21 and under.

### Jarjumbora Hub

At Waterford West focusing on Logan's Aboriginal and Torres Strait Islander Community

### Access Hub

Based at the Community Gateway serving Logan's diverse CALD community



**Supporting  
1000 Women**



**Midwives Increase from 12  
to 30 in two years**



**Decreased percentage of  
women receiving less than  
five antenatal visits.**

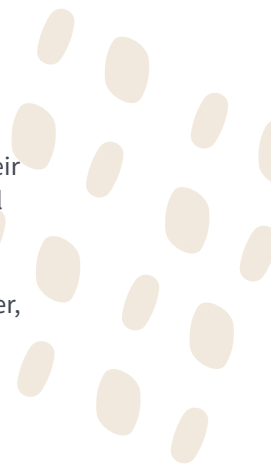
These factors represent significant indicators of success of **the Hubs in meeting the needs of Logan childbearing women, signifying, too, that the Hubs are engaging with the women who have typically been poorly served;** those women who were highly vulnerable and who, in the past, had missed out.



Faisa realised she was pregnant in 2016 after arriving in Australia from Somalia. At the time, both her English and her support network were very limited and she did not understand the Australian Health system. At 41 weeks Faisa presented to hospital experiencing limited baby movements. Tragically her unborn daughter had passed away in utero. Faisa had been unable to express her concerns for her baby at routine maternity appointments.

This experience left Faisa with a deep sadness and mistrust of the hospital system, care providers and the interpreter service. During her second pregnancy Faisa was referred to the Access Hub. Staff at the Hub were slowly able to build trust with her and build a relationship with the primary obstetrician looking after her.

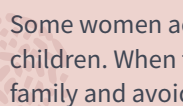
In 2021, Faisa and her partner were expecting another baby and contacted the Hub directly for their pregnancy care. This pregnancy was healthy and uncomplicated. She was relaxed in the antenatal period and trusted her care. The care provided helped to develop trust in her body and herself to make the choices that she wanted in her pregnancy. Faisa decided to attempt vaginal birth after having had 2-C-sections. This is not routinely attempted in Australian health care systems; however, with the strong support from our MGP service and our obstetrician she felt safe to do so. Special permission was obtained from the LGH director of obstetrics to facilitate the birth experience she wanted. And the birthing experience was successful. This has now developed trust between our service and Logan Hospital for future Mums.



## **“(IN THE HUB) I SHARED JOY AND LOVE – MY EXPERIENCE HELPED ME TO ENCOURAGE OTHERS”**

Village Connect has a volunteer community connector model, supported by a paid coordinator. Caring relationships Families are supported, and then encouraged to ‘pay it forward’, joining in and supporting other women during their pregnancy and early parenting journey.


“My connector is like a guiding angel. She helped me believe in myself. She is the reason why I am working here, from being one of the playgroup mums four or five years ago. I wanted to be a part of building a Hub. I had a vision – I was encouraged to be my own voice. So, I learned to be a connector. The first few clients, it was nerve wracking, I supported a woman through her pregnancy, and then she later became a connector. I shared joy and love – my experience helped me to encourage others.”




Some women accessing The Benevolent Society Hub (TBS) were involved with the Child Safety system as children. When they become pregnant they may be considered at risk and need support to maintain their family and avoid having their child removed.

One young woman had been referred around issues including previous substance misuse, poor mental health, limited family support and a history of domestic and family violence. She began self-harming after being advised by the Department of Child Safety that her child would likely be removed once born. However, she was engaged with her antenatal care. Through the positive caring relationships with her midwife and TBS support staff, she became proactive in accessing the appropriate supports to help her address the child protection concerns.

She engaged with a psychologist and implemented strategies to help her manage her mental health issues. She arranged for a Domestic Violence Protection Order. She was motivated and supported to take these positive steps to create a safe and stable home environment in preparation for the birth of her child.





**“I’VE GIVEN BIRTH THROUGH BOTH THE MGP AND THE MAINSTREAM AND SO IN MY OWN EXPERIENCE, I CAN SAY THAT GIVING BIRTH MAINSTREAM I FELT ISOLATED AND EXPERIENCED A LOT MORE ANXIETY. I DEFINITELY FEEL THE HUB MODEL HELPS TO REDUCE ANXIETY DURING PREGNANCY BIRTH AND BEYOND”**



# SOMETHING REALLY SPECIAL IS HAPPENING HERE!

The Hubs have achieved a range of statistically significant perinatal outcomes compared to standard care in Logan<sup>3</sup>.

Indeed, the success of the Logan approach has resulted in a public commitment to moving to 50% of women birthing through the hospital service to be cared for via a Community Hub.



Increased access to antenatal care by the target population (Maori, Pasifika women, young women, refugee and asylum-seeking women and First Nations women)<sup>4</sup>



Average number of attendances higher



Mothers experienced higher screening rates for alcohol use and domestic violence



Average number of attendances higher

The story of hope and opportunity continues through the estimates identified in a Hubs cost analysis report, based on the savings in reduced interventions compared with the Hubs not being in place<sup>5</sup>.

## A minimum saving of 13% on a hospital based midwifery model in 2020 - 2021

## Closing the gap in health outcomes for indigenous women using the service

**And** there are so many more outcomes to explore. The social implications and the social return on investment were not identified through this early work. Further, as yet, there has been no assessment of the summative impact of savings across interventions avoided. The cost analysis report does not factor the longer-term health and economic gains to be leveraged from prevention of chronic health conditions, through healthy start to life and system scale-up of early effective evidence-based interventions.

<sup>3</sup> Logan's Community Maternal and Child Health hubs: The contribution case for Collective Impact practice – Clear Horizon 2021

<sup>4</sup> Nurses and Midwives EB10 Innovation fund – Evaluation Framework – Community Maternity Hubs

<sup>5</sup> Health and Business Collaborative Synergy, 2021



**“THE HUBS ARE DEFINITELY THE SIGNIFICANT  
PIECE THAT REALLY HAS CHANGED LIVES....  
THEY CERTAINLY HAVE CHANGED THE  
MATERNITY LANDSCAPE WITHIN LOGAN”**

Founder of Harrison's little wings



# BETTER OUTCOMES FOR WOMEN AND CHILDREN

Numerous evaluations have demonstrated that continuity of midwifery care delivers improved birth outcomes for mother and child, improved experience of care for mothers and family, improved experience of care for clinicians and cost efficient service delivery.<sup>6</sup>

## Women using the Hubs were:

### Statistically more likely to:

- attend 5 or more antenatal appointments
- undergo antenatal psychosocial screening
- receive an influenza vaccine
- have a spontaneous onset of labour
- have a vaginal non-instrumental birth
- use non-pharmacological pain relief
- exclusively breastfeed

### Less likely to:

- require a caesarean section
- have a baby before 37 weeks gestation
- require SCN admission
- use epidural anaesthesia
- have an induction of labour

The individualised support and warm referral pathways to other services have led to improved healthy behaviours by women and families, such as reduced smoking and alcohol intake; better engagement with their GP, and having their child vaccinated. It also includes support to improve overall family wellbeing through referrals to other services, including emergency bill paying, housing, refugee settlement, and domestic and family violence support.

Increased vaccination rates and linkages established with other support services in the community are also likely to lead to overall improvements in family health and wellbeing and reduced presentations to ED and inpatient admissions.

# OUR VISION MOVING FORWARD

The opportunities the Logan Community Maternal and Child Health Hubs provide are far-reaching. While the Hubs are established, community members feel the model of community partnership and care is still vulnerable and requires further support and investment.

Over the next 5 years we propose a robust consolidation of the Hubs model across Logan, honouring the co-design input from community and responding to the learnings from current sites. Associated with this system of care, we would **grow the model to include one new Hub per year** and build deep collaborations with ancillary services to extend our scope and impact. With these steps in place, we are confident we would create a service which is ahead of the curve in service development and delivery.



**Reduction in NICU admissions** currently flowing to other hospitals

**The summative impact of savings across interventions avoided**

**Potential impact on reduced infant admissions through increased vaccination rates**

**Increasing numbers of mothers with complex needs** who are being managed by the Hubs who may otherwise experience poorer birth outcomes

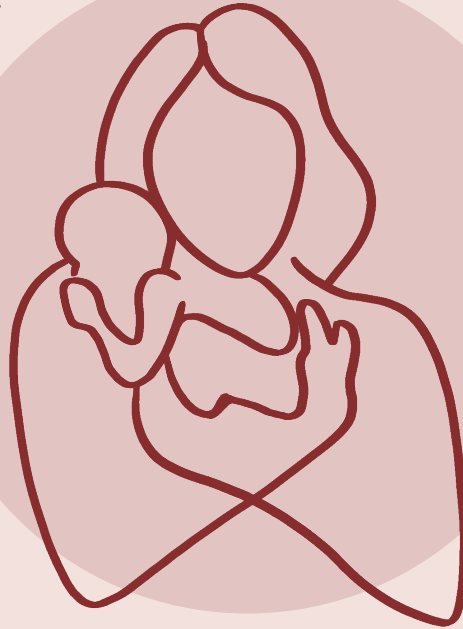
**Education in NICU admissions** currently flowing to other hospitals

**Measurable shift in intergenerational disadvantage and trauma**

**Increased smoking cessation**

**Improved APGAR scores**

**A bespoke Logan offering would result in**



**Increased rates of antenatal attendance**

**Reduced pre-term births**

**Reduced length of stay relating to birth and non-birth related maternity admissions**


**Reduced emergency presentations during the antenatal period**

**Further increases in spontaneous vaginal births and reduced rates of interventions as the increased capacity of mothers engage in treatment decisions flow through to the standard model of inpatient birthing at Logan Hospital**

**Improved early management and outcomes for mothers and babies experiencing greater complexity, such as diabetes**

**Reduced post-natal re-admissions to hospital for mother and baby** in the early weeks/months post-birth resulting from iatrogenesis and complications/increased morbidity resulting from over-intervention avoided by the Hubs



A photograph of a woman holding a baby, with a decorative dotted line and a patterned overlay. The text is centered in a semi-transparent box.

**THE HUBS ARE ABOUT CHANGING LIVES; ABOUT CREATING THE CONDITIONS IN WHICH A MOTHER IS ABLE TO FEEL SAFE AND RESPECTED DURING PREGNANCY, LABOUR AND BIRTH AND POST-BIRTH. THIS GIFT CAN HAVE A PROFOUND AND LONG-TERM EFFECT ON THE RELATIONSHIPS BETWEEN A MOTHER AND HER BABY, WITH FLOW-ON EFFECTS TO FAMILY WELLBEING. THIS IS AN OPPORTUNITY TO CREATE INTERGENERATIONAL CHANGE.**





# HOW INVESTMENT WILL HELP OVER THE NEXT 5 YEARS

## **A roadmap to sustainability.**

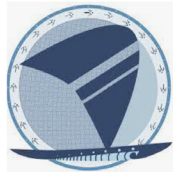
Building on the trust and deep collaboration which underpinned our first Logan Community Maternal and Child Hubs, there is an urgent need for investment from government and other stakeholders if we are to significantly address maternal and child health across Logan City. Our commitment to the first 1000 days of a child's life will only be met if we can address access issues right across these critical days. Investment will enable us to continue to build on our learnings and successes and to connect deeply with other essential services and opportunities in the Logan area for full wrap around support. Your support will enable a networked group of maternity Hubs which will address the cultural and individual needs of mothers and their babies across Logan.

While our current work is significant, there remain places in Logan where such services are either not present, not fit-for-purpose, or are not adequately supported. Based on the success of the Hubs, investment is needed for a forward program

**YOU'RE NOT JUST WORKING WITH A MUM, YOU ARE WORKING WITH A WHOLE FAMILY, THERE IS NO POINT PROVIDING A SERVICE TO A WOMAN WHO IS GOING HOME TO FAMILY VIOLENCE BECAUSE THERE ISN'T ADEQUATE SUPPORT.**

# CURRENT PARTNERS AND INVESTORS

## Hosts



Village Connect



Browns Plains  
Early Years  
Centre

benevolent  
SOCIETY



Australian Government

## Acknowledgments

Hub partners pay respect to the Traditional Owners and custodians of the Land on which our community lives, works and plays, the Yugambah and the Yaggera people. We pay our respects to Elders past, present and emerging and seek their guidance and wisdom to ensure all children get the best start in life. We extend our respect to all Elders and Aboriginal and Torres Strait Islander peoples in Logan and across Australia.