

Review Implementation Committee – Themed Recommendation Table

Theme	Sub-Theme	Recommendation	Responsible Lead	Timeline
Workforce Planning & Staffing Models	Staffing Methodology & Compliance	<ul style="list-style-type: none"> Blue shading indicates statewide implementation opportunities Status report no. 1 is due to the Secretary April 2025 		
		1: The Tasmanian Health Service to collaborate with the Office of the Chief Nurse and Midwife to develop a set of operational principles to be used to allocate staff in each area across the inpatient maternity service regardless of chosen methodology to determine staffing profile.	Office of the Chief Nursing and Midwifery Officer (CNMO)	Q2 2025
		2: Tasmanian Health Service to ensure that the Midwifery Unit Manager has training in the use of whatever methodology is chosen to determine the establishment staffing profile and the application of the principles noted in Recommendation 1 including - Roles in excess of direct care staffing - Correlation between the required Full Time Equivalent (determined by Birthrate Plus®) and the Establishment / Vacancy Tool.	OCNMO	
		3: Office of the Chief Nurse and Midwife to collaborate with the Tasmanian Health Service to develop a shared understanding of the methodology and the application of Birthrate Plus® if this methodology is to be used going forward and the application of the principles noted in Recommendation 1.	OCNMO	
	Recruitment & Retention	35: The Royal Hobart Hospital to ensure that the Associate Midwifery Unit Managers do not have allocated direct care responsibilities. 6: Royal Hobart Hospital must develop a clear understanding of full-time equivalent shortfall and proactively recruit even if these means temporarily going over their allocated full-time equivalent.	Office of the Executive Director Nursing and Midwifery -	Q2 2025

Review Implementation Committee – Themed Recommendation Table

			Hospitals South (EDNMS-HS)	
		<p>7: Royal Hobart Hospital to develop business rules for the existing tool that is used to calculate and monitor:</p> <ul style="list-style-type: none"> -The Full Time Equivalent required, inclusive of leave entitlements, an allowance for unplanned leave, professional development and other enterprise bargaining agreement entitlements - The vacancy rates - The recruitment target 	OEDNMS-HS	
		9: The Tasmanian Health Service to develop an expedited process for the recruitment of staff providing direct clinical care with a priority for midwifery staff.	OEDNMS-HS	
	Flexible Work Models & Rostering	33: The Tasmanian Health Service to implement more flexible employment arrangements for midwives working within the Tasmanian Health Service including supporting small fractional appointments, set days, limitations or no night duty, 'short' shifts and flexibility when staff are returning from parental, or carers leave for set periods of time. An application and transparent approval process, with criteria should be developed to support implementing these arrangements.	OEDNMS-HS	Q2 2025
		34: The maternity service to review the practice of filling the roster shortfalls and ensure that it is revised to offer part-time staff, employed across the maternity service, the first option to fill vacancies.	OEDNMS-HS	
Pregnancy Assessment Centre & High Acuity Staffing		4: Royal Hobart Hospital to undertake an audit of Pregnancy Assessment Centre phone call activity to help inform staffing requirements for this area.	OEDNMS-HS	Q2 2025
		5: Royal Hobart Hospital and the maternity service to prioritise the staffing in the Pregnancy Assessment Centre and High Dependency Unit with staffing in these areas only moved in times of an emergency.	OEDNMS-HS	

Review Implementation Committee – Themed Recommendation Table

Education & Competency Development	Workforce Innovation	36: The Office of the Chief Nurse and Midwife to develop a role statement and way of working for the Registered Nurse and the Midwife team within the maternity unit.	OCNMO	Q3 2025
		37: The Office of the Chief Nurse and Midwife to develop a role statement and way of working for the Registered Nurse in the care of unqualified neonates managed in the ward and this be considered for implementation in Tasmanian Health Service maternity services.	OCNMO	
	Graduate & Early Career Midwives	8: The Office of the Chief Nurse and Midwife to collaborate with the Tasmanian Health Service to develop and implement a structured Graduate Midwife Program: - Provided over 12 months rather than the current 6 months - Linked to achieving competencies - Be delivered through a structured model of professional supervision and support that is delivered in additional to direct care staffing allocations i.e., a dedicated clinical coach.	OCNMO	Q4 2025
		10: The Tasmanian Health Service to ensure that early career midwives are provided with the opportunity to learn skills related to the insertion of vaginal induction agents and the Office of the Chief Nurse and Midwife to ensure that this is included in the Graduate competency set.	OCNMO	
Ongoing Professional Development		11: The Tasmanian Health Service to ensure that early career midwives learn skills in how to manage an induction to ensure that the woman establishes labour effectively and in a timely manner and Office of the Chief Nurse and Midwife to ensure this is included in the Graduate competency set.	OCNMO	
		22: The Tasmanian Health Service to develop and implement an in-service calendar that includes initial and refresher patient-controlled analgesia and epidural education for all new midwifery staff, including graduates and students. Develop a competency assessment in these areas for all new staff.	OCNMO	Q3 2025
Medication Safety & Audits		18: The midwife in charge to ensure that the S8 and S4D medication count is undertaken at each shift change in accordance with the local policy.	OEDNMS-HS	Q2 2025

Review Implementation Committee – Themed Recommendation Table

Clinical Governance & Safety		<p>19: The Royal Hobart Hospital to develop a consistent approach to S8 and S4D medication audits that includes reports on all the audit elements</p> <ul style="list-style-type: none"> - Results of S8 and S4D drug audits be displayed in a graph form in the staff base. - Medication audit results be included in maternity unit monthly meetings and Women's and Children's Services Quality and Safety Committee meetings. 	OEDNMS-HS	
		20: The existing practice / policies / protocols at Royal Hobart Hospital be updated to support concurrent administration of Vitamin K and Hepatitis B vaccination in neonates.	OEDNMS-HS	
	Induction of Labour & Stillbirth Prevention	12: Timeline from 'decision to induce' to commencement of induction: The Tasmanian Health Service to ensure women receive adequate information regarding Induction of Labour including reasons why Induction of Labour is being recommended thus ensuring informed consent is obtained.	OEDNMS-HS	
		13: The Royal Hobart Hospital to review its processes of data collection to ensure that all data elements are correctly identified.	OEDNMS-HS	Q3 2025
		14: The Royal Hobart Hospital to review the terms of reference for the Tasmanian Health Service South Perinatal Morbidity and Mortality Working Group to ensure that all third trimester stillbirths are reviewed and discussed at this forum	OEDNMS-HS	
	Emergency Equipment & Response	<p>23: The maternity unit to develop a checklist and audit tool that is attached to each of the emergency trolleys to enable streamlined daily checking</p> <ul style="list-style-type: none"> - Results of the audits be displayed in a graph form in the staff base and be included in maternity unit monthly meetings. - Audit results be included in the Women's and Children's Services Quality and Safety Committee meetings. <p>24: An Associate Midwifery Unit Manager checklist be developed for use at the team handover that includes the allocation of the person/s responsible for checking the emergency trolleys.</p>	<p>OEDNMS-HS</p> <p>OEDNMS-HS</p>	

Review Implementation Committee – Themed Recommendation Table

		<p>25: The Royal Hobart Hospital to ensure that when there are incidents identified where equipment is missing, or mediation expired on an emergency trolley that a Safety Reporting and Learning System incident is completed.</p> <p>26: The Midwifery Unit Manager and Associate Midwifery Unit Managers work with the staff to identify the standard stock that is required in each of the birth rooms and in each stock room on both the East and West sides of K7.</p>	OEDNIMS-HS	
Model of Care & Service Delivery	Maternity Model of Care & Service Planning	21: The Tasmanian Health Service to undertake a business case for the allocation of a dedicated clinical pharmacist to the maternity service.	OEDNIMS-HS	Q4 2025
		30: The Royal Hobart Hospital to review the maternity model of care, and then subsequently the number of operational birth suites and antenatal and postnatal beds required to meet service demand.	OEDNIMS-HS	
		31: Royal Hobart Hospital to establish a representative working group, utilising a redesign methodology, that fosters collaboration to address the workflow and other concerns associated with K7 footprint.	OEDNIMS-HS	
		32: The Tasmanian Health Service to develop a standard operating procedure for the collection and use of activity and occupancy data to inform bed and birth suite requirements.	OEDNIMS-HS	
		27: The Tasmanian Health Service to ensure those appointed to leadership roles undertake the leadership programs offered by the Department of Health and have regular supervision or mentorship.	OEDNIMS-HS	
	Midwifery Leadership & Structure	28: The Royal Hobart Hospital to review the structure of the midwifery services with specific consideration given to separating the management accountability of the ambulatory and inpatient services.	OEDNIMS-HS	
Woman-Centred Care		15: The Royal Hobart Hospital to review the business case about staffing of the lactation service within 30 days to ensure the outcome can be provided to the lactation consultants and considered in the budget process. The Royal Hobart	OEDNIMS-HS	Q4 2025

Review Implementation Committee – Themed Recommendation Table

& Consumer Engagement	Breastfeeding & Lactation Services	Hospital to provide an outcome about the lactation service business case within 30 days of this report to the Lactation Consultants		
		16: The Tasmanian Health Service to contract private lactation consultants to provide lactation services on a no gap Medicare basis.	OEDNMS-HS	
		17: The Tasmanian Health Service to work with community organisation such as the Australian Breastfeeding Association to develop an innovative model to assist mothers with breast feeding (pre and postnatal).	OCNMO	
	Consumer Engagement & Advocacy	29: The Royal Hobart Hospital to establish a Maternity Consumer Advisory Group.	OEDNMS-HS	Q3 2025
Governance & Implementation	Implementation Oversight	<p>38: The Tasmanian Department of Health to work together with the Tasmanian Health Service and convene an Implementation Committee reporting to the Secretary, Department of Health to oversee the implementation of the recommendations adopted from this report.</p> <ul style="list-style-type: none"> - The committee comprises representatives from <ul style="list-style-type: none"> * The Maternity Service * The Royal Hobart Hospital Executive * The Tasmanian Health Service Executive * Consumer representatives * Tasmanian Department of Health including the Chief Nurse and Midwife or delegate - Progress reports are provided in 3 monthly intervals to the Secretary, Department of Health via the Tasmanian Health Service Executive. 	THS Executive	Q4 2025