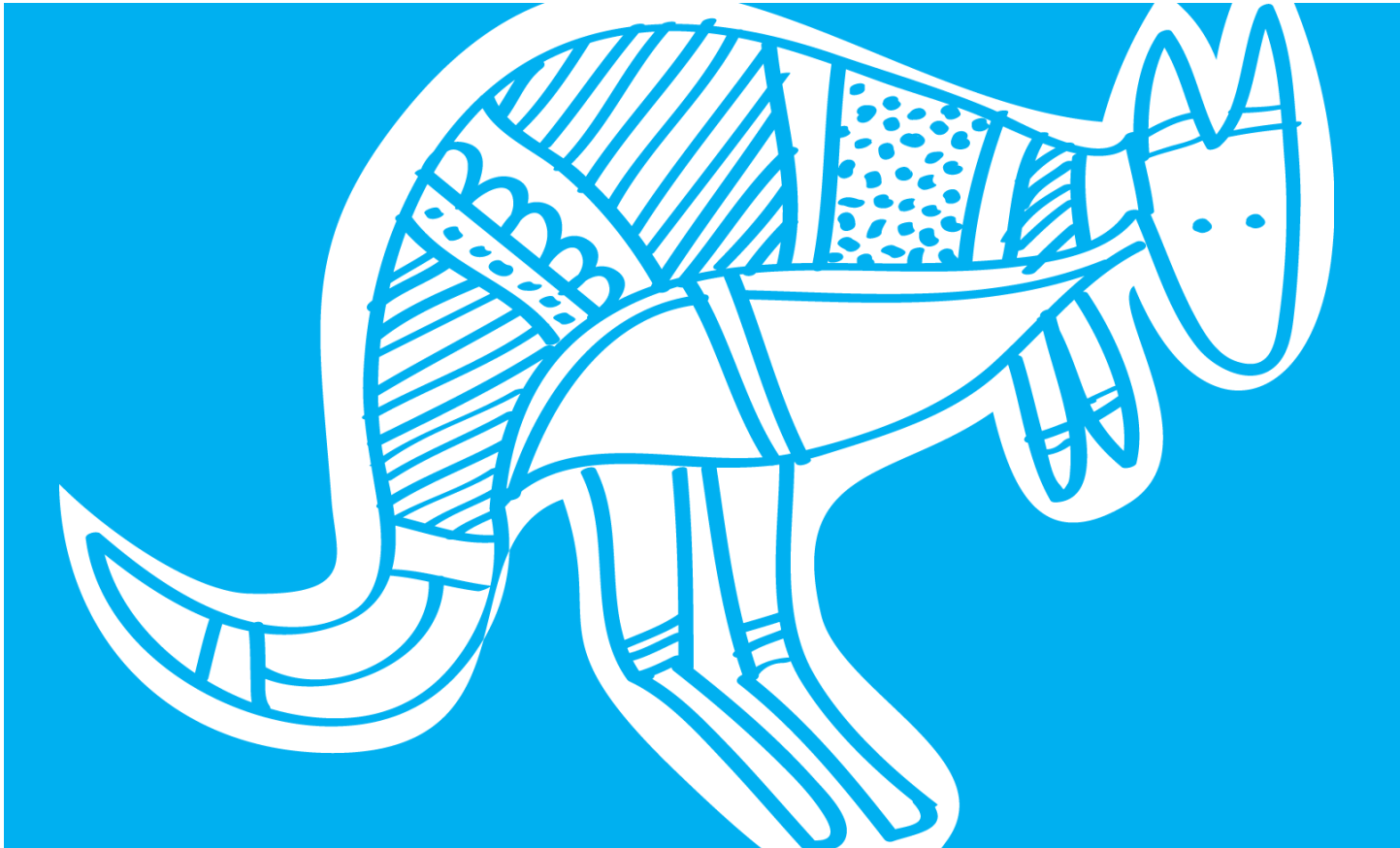


# Mater Mothers Hospital Virtual Alignment 3

## Session 1

# Acknowledgment of Country



# Virtual etiquette

This is an opportunity to reinforce your learning and utilise the expertise of our subject matter experts.

We invite you to use the '**chat**' or '**put your hand up**' features to ask questions in all sessions

- Have you listened to the 5 podcasts?
  - If not, do catch up – they are short, sharp, amusing and very informative



# Virtual etiquette

Please keep your **video on** always

- We must **confirm attendance** for the duration of the session to allocate points!
- Are you **logged in with the name you registered**. This is important to get your certificates and completion of the course

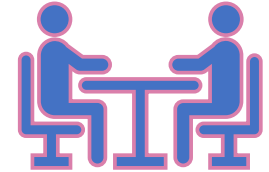
Please **mute your microphone**, unmute during discussions

Are you in a quiet, **comfortable position with minimal distractions?**

- Please make sure your phones are on silent, dogs, cats, children, background noise
- treat this as if you were attending an education event in person
- consider that everyone can see and hear you, *be aware of possible reflections*



# Virtual etiquette



## ALL QUESTIONS WELCOME

- Use the chat function to lodge your questions
- We will do our best to answer them during the session or
- 'Car Park' them to be answered within the Q&A session or when the relevant subject matter expert is accessible.

Depending on the 'depth of the dive', we may have to take some questions on notice and get back to you with an answer post-program.



# Acknowledgments

- MMH
- Caroline Nicholson
- Anne Williamson, Erin Hutley-Clarke, GPLM
- Mater Education
- BSPHN
- Our speakers
- Our midwifery colleagues

# Session 1: Perinatal Mental Health

Time	Task	Who
8:30 am	Welcome, housekeeping, learning objectives	Dr Wendy Burton
8:40 "If I had 5 minutes.."	SME Panel Information sharing Q&A: <ul style="list-style-type: none"><li>• Mental illness in the perinatal period</li><li>• The consumer perspective</li><li>• Pharmacology</li><li>• Parenting Support Centre</li><li>• Psychologist</li><li>• Screening, referral pathways</li></ul>	Dr Beth Mah Tamara Zeimer Dr Treasure McGuire Dr Majella Henry Dr Constanze Schulz Dr Maggie Robin
10:15 am	Antenatal Screening, models of care, immunisation & referral	Dr Maggie Robin
10:30 am	Morning tea	All

### Session 2:

# Case scenario discussions

Time	Task	Who
11:00	Group work; Medical conditions in pregnancy	Dr Julie Buchanan Dr Jo Laurie CM Anne Williamson CM Erin Hutley-Clarke CM Jan Tyrell CM Kristen Winton
12:00	Reconvene and present back	All
1:00	Workshop conclusions	Dr Maggie Robin



# Alignments 1 and 2

## Alignment 1 content

- First trimester presentations, recommended screening tests, ultrasound scanning including nuchal translucency recommendations, NIPT, SMA/CF/FXS, gestational diabetes, prescribing in pregnancy, communication with MMH, Rh negative women, hypertension, pre-eclampsia, early pregnancy bleeding, reduced fetal movements, immunisations and depression

## Alignment 2 content

- Preconception workup, fertility, diabetes in pregnancy, preterm labour, premature rupture of membranes, ectopic pregnancies, persistent pelvic pain, infections in pregnancy, postpartum management, breastfeeding and neonatal examination

# Content availability

- This presentation is available online, as are AM1 and AM2
- It will be updated as required, so may vary in appearance from the power point you viewed when you attended the alignment program.
- From [www.materonline.org.au](http://www.materonline.org.au) go to **Shared Care Alignment**, find *program resources* and look for [Alignment 3](#) (please note we run three programs, Alignment 1, 2 ,3 and expect to launch Alignment 4 in 2021)

# Objectives

- To provide relevant, practical **information** to GPs, obstetricians and midwives about **clinically relevant** topics relating to best practice maternity care
- To improve the **relationships** and highlight the **communication** channels between the primary, secondary and tertiary sectors

# Online resources

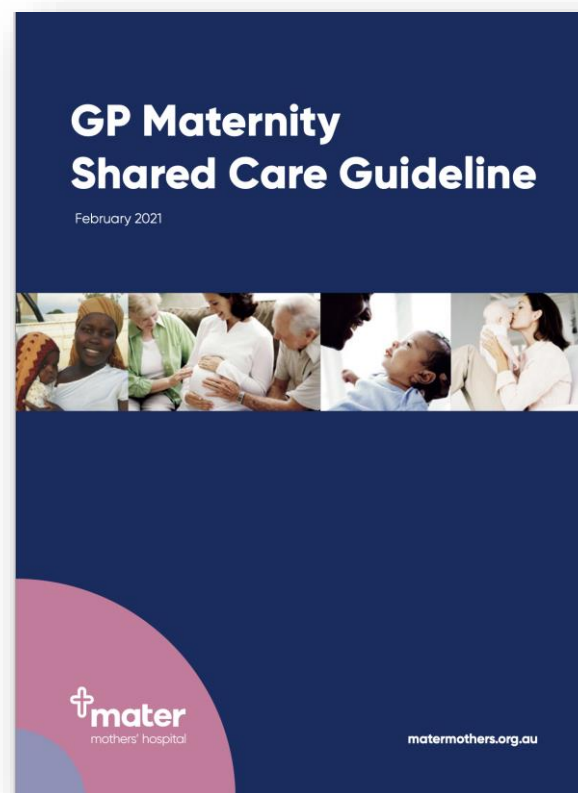
- ✓ [Mater Guideline](#)
- ✓ [Mater Brochures](#)
- ✓ [National pregnancy care guidelines](#)
- ✓ [RANZCOG education resources](#)
- ✓ [Queensland Clinical Guidelines](#)
- ✓ [Australian Society of Infectious Diseases](#)
- ✓ [GP Learning \(RACGP\)](#)
- ✓ [Australasian Diabetes in Pregnancy Society](#)
- ✓ [Brisbane South PHN Maternity Resources](#)
- ✓ [Brisbane North PHN Maternity Resources](#)
- ✓ [Maternity-Matters](#)

# Online mental health resources

- ✓ [Beyond Blue](#)
- ✓ [Centre of Perinatal Excellence](#)
- ✓ [Pregnancy, birth & baby](#)
- ✓ [PANDA](#)
- ✓ [Mind the bump](#)
- ✓ [What Were We Thinking](#)
- ✓ [Head to Health](#)
- ✓ [The Marce Society](#)

# GP Maternity Shared Care Guideline

58 page summary of  
essential principles  
underlying GP maternity  
shared care.



# Consumer-led discussion

***Tamara Zeimer*** may share some of her lived experience of perinatal mental health with us

As health professionals, we are used to hearing such stories. As individuals, we can find ourselves triggered.

**Important (trigger warning) :**

Please keep yourself safe and, if you need to, exit that discussion and rejoin us at the end of the 12 minutes.

# Having a conversation

Our speakers have **5** minutes each to tell you what they wish GPs knew about their topic/area of special interest

We invite the speakers to give you an “elevator pitch” conversation

You will then break into small virtual groups and be able to do a deeper dive/ask questions/expand the conversation with **12** minutes per speaker

- Please listen respectfully
- Feel free to ask questions/seek clarification.
- You will be given a warning at 11 mins
- At 12 mins your speaker will be “moved” to the next table

We have **10** minutes for further group discussion prior to a morning tea break.

**Your time starts now!**

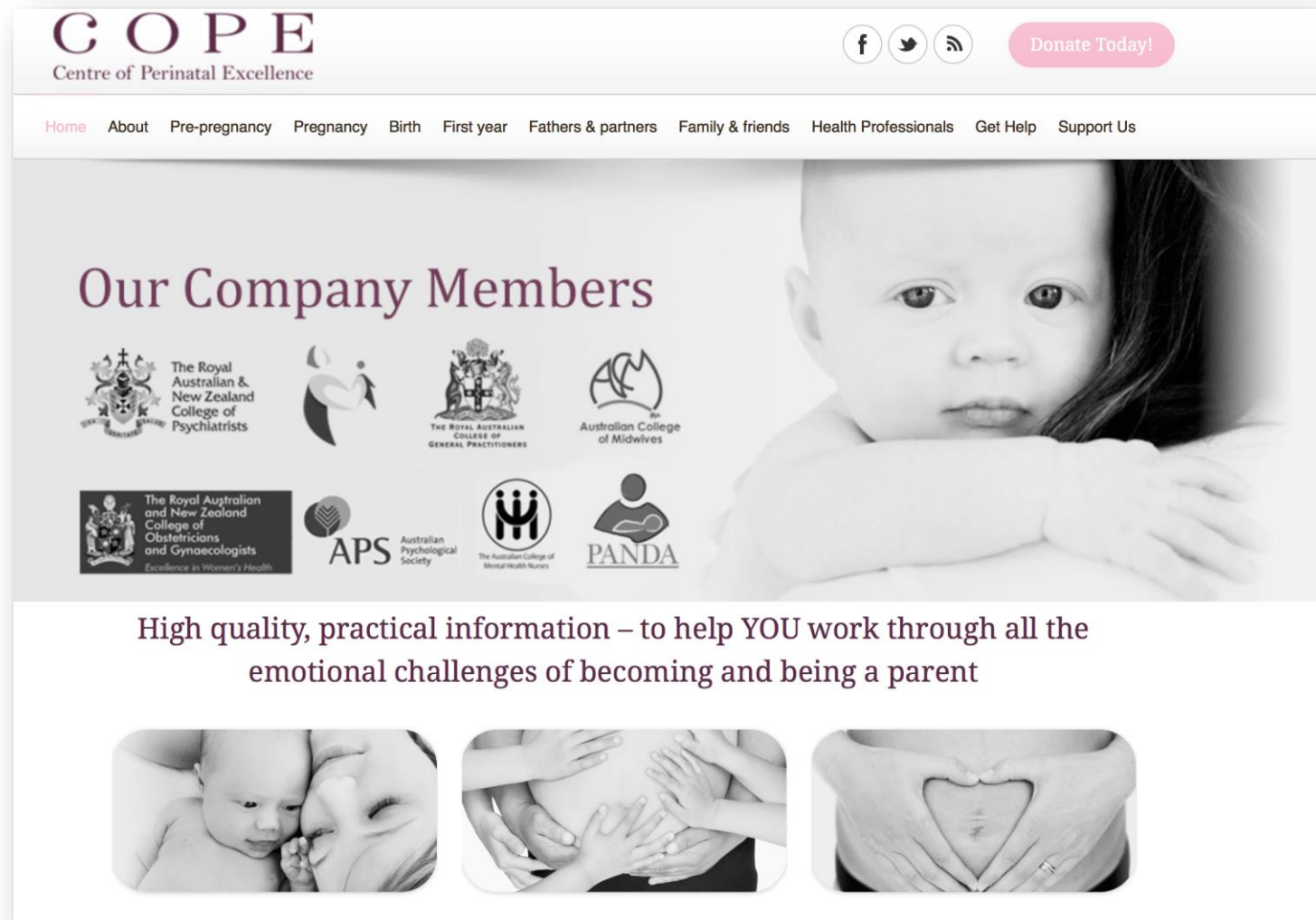


# Elevator pitch

## “if I had 5 minutes...”

Topic	Who
<ul style="list-style-type: none"><li>• Mental illness in the perinatal period</li><li>• The consumer perspective</li><li>• Pharmacology</li><li>• Parenting Support Centre</li><li>• Psychologist</li><li>• Screening, referral pathways</li></ul>	<ul style="list-style-type: none"><li>• Dr Beth Maher</li><li>• Tamara Zeimer</li><li>• Dr Treasure McGuire</li><li>• Dr Majella Henry</li><li>• Dr Constance Schulz</li><li>• Dr Maggie Robin</li></ul>

## COPE






**COPE**  
Centre of Perinatal Excellence

Home About Pre-pregnancy Pregnancy Birth First year Fathers & partners Family & friends Health Professionals Get Help Support Us

**Our Company Members**

The Royal Australian & New Zealand College of Psychiatrists  
The Royal Australian College of General Practitioners  
The Australian College of Midwives  
The Royal Australian and New Zealand College of Obstetricians and Gynaecologists  
APS Australian Psychological Society  
The Australian College of Mental Health Nurses  
PANDA

High quality, practical information – to help YOU work through all the emotional challenges of becoming and being a parent



# Ready to cope

## Ready to COPE

Motherhood is many things...  
and easy isn't always one of them.

Be informed and feel reassured.

Sign up to receive **free** supportive emails as you travel through the emotional journey of pregnancy and early motherhood.

<input type="text" value="Name"/>	<input type="text" value="Your email address"/>
<input type="text" value="Postcode"/>	<input type="text" value="Expected / actual date of birth"/>
<input type="text" value="How did you hear about Ready to COPE?"/>	

☒ I have reviewed and agree to the terms of COPE's [Privacy Policy](#)

[Yes, Sign me up!](#)

[FAQs about Ready to COPE](#)

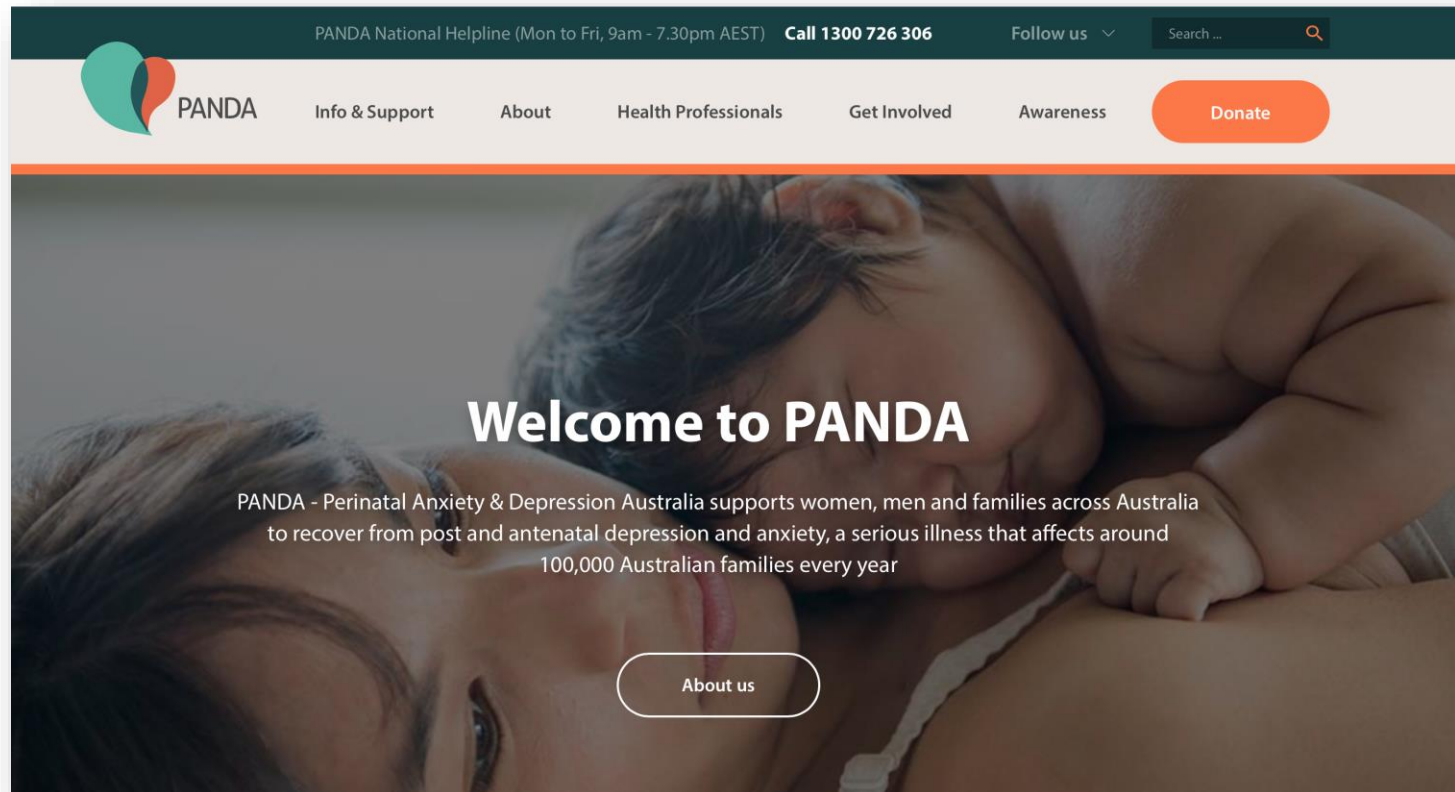
\* We ask you to share your baby's due/birth date so that the information in our emails will arrive when you need it the most.

[Resources for healthcare providers](#)

[Resources for other service providers](#)




# PANDA




## moodgym

A screenshot of the moodgym website. The top section has a green background with the "moodgym" logo in white. To the right of the logo are input fields for "Email/username" and "Password", each with a small eye icon to toggle visibility. Below these is a purple "Log in" button and a link "» Forgotten password". The main content area is white and features the heading "Welcome to moodgym" in a grey script font. Below this is a paragraph explaining that moodgym is an interactive self-help book for depression and anxiety. A list of five benefits follows, each with a purple circular icon: a globe for "Over 1 million users worldwide", a padlock for "Anonymous, confidential", a document with a lock for "Secure handling of your data", an hourglass for "Access anytime, at your own pace", and a bar chart for "Scientifically evaluated". At the bottom, there is an orange button "New users register here" with a play icon, a light blue button "Frequently Asked Questions" with a speech bubble icon, a warning icon and text "See Emergency help if you are in crisis or need immediate help.", and a link "Looking for other languages?".

**moodgym®**

Email/username :






Password:


 Log in


[» Forgotten password](#)


### *Welcome to moodgym*

moodgym is like an interactive self-help book which helps you to learn and practise skills which can help to prevent and manage symptoms of depression and anxiety.

-  Over 1 million users worldwide
-  Anonymous, confidential
-  Secure handling of your data
-  Access anytime, at your own pace
-  Scientifically evaluated

 [New users register here](#)

 [Frequently Asked Questions](#)

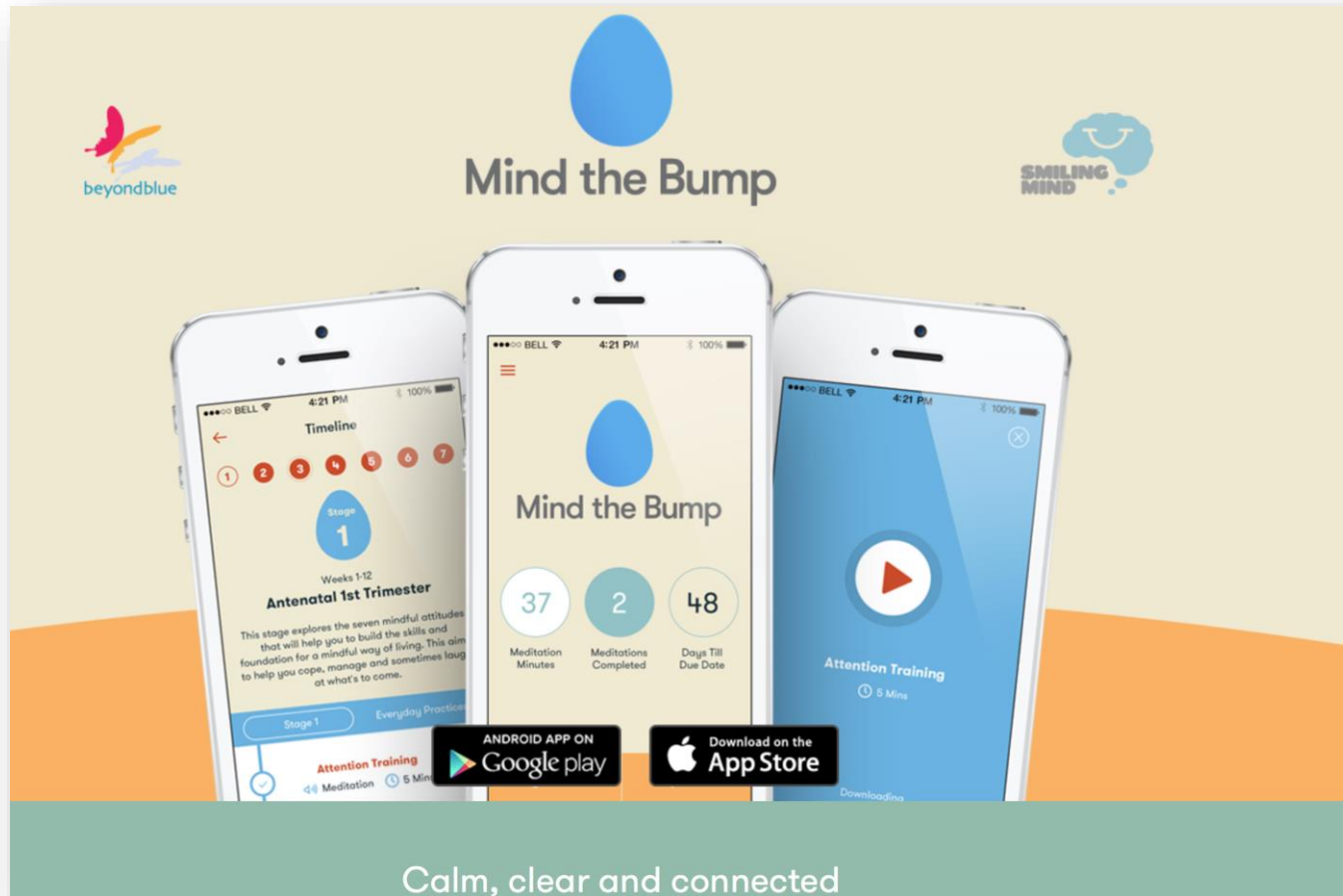
 See [Emergency help](#) if you are in crisis or need immediate help.

[Looking for other languages?](#)

# Peach Tree



# Mind the Bump





# What Were We Thinking



The screenshot shows the homepage of the 'What Were We Thinking' (WWWT) website. The header features the WWWT logo, the title 'What Were We Thinking!', and the Monash University School of Public Health and Preventive Medicine logo. A navigation bar includes links for Home, For parents, For professionals, Publications, About WWWT, About us, Blog & app, and Contact. Social media icons for Facebook, Twitter, LinkedIn, YouTube, and Instagram are also present, along with a subscriber count of 86.

**For Parents**

- Introduction
- How to use these worksheets
- About Babies Worksheets
- Each baby is different
- Understanding baby's crying
- The feed-play-sleep routine
- Enough sleep
- Settling your baby
- About Mothers and Fathers Worksheets
- What we thought
- But you have a healthy baby
- Losses and gains
- Parents' workload
- Things you say and do
- Your family
- Going it alone
- Help and support
- Speaking up for yourself

**For Professionals**

- Introduction
- Login

**Welcome to WWWT!**

The birth of a first baby is one of the biggest life transitions an adult will experience. Major life changes are always accompanied by mixed feelings and most parents feel under-equipped for the tasks of infant care and managing a household with a baby.

This website contains information about common experiences in the early months of parenthood and some effective ways of thinking about and managing them.

All information on this website is drawn from up-to-date research and the experiences of many parents of new babies. We hope that you find the site helpful as you learn to live with your first baby.

**Want to have the WWWT program at your fingertips? Try the new phone app!**

www.whatwerewethinking.org.au content was developed with funding from the Australian Government and the Jack Brockhoff Foundation. The authors have sole responsibility for the content of the website.

The site content is provided for your information; if you have comments you are welcome to submit them to: [whatwerewethinking@monash.edu](mailto:whatwerewethinking@monash.edu)

This site is not a substitute for advice from your family doctor or another health professional.

**For Parents »**

- » Introduction
- » About Babies Worksheets
- » About Mothers & Fathers Worksheets

**For Professionals »**

- » Background Theory
- » Worksheets
- » Publications

**What Have You Been Doing All...**

**WWWT Blog** [View all articles →](#)

**The day we welcomed Esme**  
JEMMA | 06 JUNE 2016

Every experience is new as a first time mum, including...



# Medicare items

**16500** or **16591** can be combined with:

- **3, 23, 36** or **44**(**IF** the requirements for *each* item number are met)
- **2713** Professional attendance in relation to a mental disorder, at least 20 minutes, taking relevant history, identifying presenting problem, providing treatment and advice and, if appropriate, referral, and documenting
- **2700, 2701, 2715, 2717** (MHCP with or without training)
- **2712** (MHCP Review)

Must be for separate issues and noted as such when billing.  
For auditing purposes, itemise the consultation e.g. Issue 1 xyz; Issue 2 antenatal care

# Perinatal mental illness Mx

If public specialist assessment is required:

**Metro South Acute Care Services** (1300 MH CALL = 1300 64 22 55)

Offer initial triage and assessment for severe or complex presentations. They also provide expert advice on medication management

# Maternal Mental Health Families in Mind

**Mater's PMH Assessment & Support Service for new families during the perinatal period (from conception to 12 months post-birth).**

**A CNC provides**

- initial mental health assessment
- information/psycho-education regarding mental health concerns e.g. postnatal depression, anxiety, attachment & bonding issues, adjustment issues, coping with stress etc
- advice on treatment options: referral for specialist support e.g. community psychologists, parent aide, parenting programs, mother-baby in-patient programs
- co-ordinated care with midwifery/obstetrics/GP and other community stakeholders
- counselling and brief interventions
- access to psychiatric specialists
- telephone advice for patients, GPs, and other health care workers



# Maternal Mental Health Families in Mind

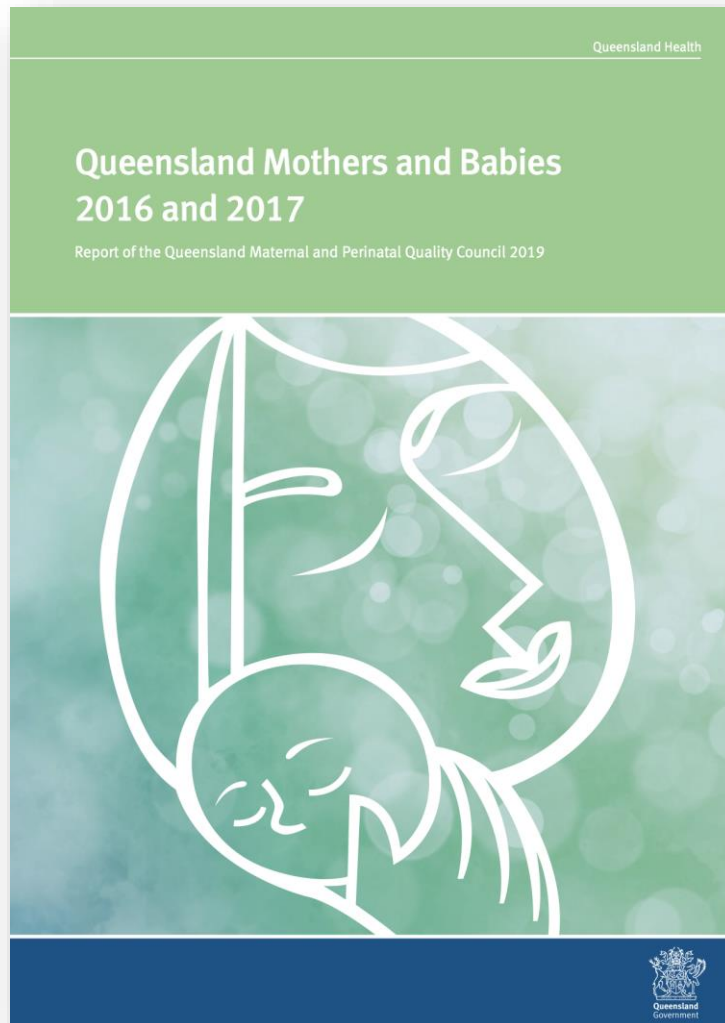
**FiM OUTPATIENT CLINIC** FiM also offers a limited number of outpatient sessions for perinatal mothers living within the Mater Hospital catchment area who need 1:1 mental health assessment and treatment.

**REFERRAL : Phone 3163 7990 ( Monday – Friday 0830 -1700), or email [materinmindintake@mater.org.au](mailto:materinmindintake@mater.org.au) Please include :**

- Patient details, contact information, MMH booking status
- Risk assessment
- current medical issues, past psychiatric history
- reason for referral ( clinical question to be answered),
- relevant additional information- whether the request is for the patient to be seen antenatally, postnatally, or during their in-patient stay and that the patient is aware and has consented to the referral.



# QMPQC report



“Attention is drawn to the importance of mental health follow up.

Antenatal and postnatal screening has led to a higher identification of women at risk of mental health issues during pregnancy.

Suicide is the leading cause of maternal death and little is known about the circumstances in which these deaths occur.”

# Mater Mothers Hospital; Virtual Alignment 3

Table 13: Cause of maternal deaths in Queensland 2016 and 2017

Cause of death	During Pregnancy/ 0-42 days postpartum Number	43-365 days Postpartum Number
<b>Suicide</b>	2	7
<b>Malignancy</b>		
Metastatic Melanoma		1
Metastatic cervical cancer		1
Metastatic breast cancer		1
Metastatic pancreatic cancer	1	
Metastatic lung cancer		1
Glioblastoma		1
Lymphoma	1	
Carcinoma (oesophagus)		1
<b>Cardiac</b>		
Coronary artery thrombosis	1	
Mitral valve prolapse		1
Cardiac arrest		2
Cardiomyopathy	2	
Sudden unexplained death		1
<b>Trauma</b>		
Head, neck and trunk trauma (fall from height)		1
Motor vehicle trauma		2
<b>Substance use disorder</b>		2
<b>Other causes</b>		
Amniotic Fluid Embolism	1	
Intra-cerebral cyst	1	1
Bacterial meningitis	1	
Intra-cerebral haemorrhage	1	
Primary postpartum haemorrhage	1	
Anaphylaxis (food)		1
Yet to be determined		1



In 2016 and 2017

● 8 maternal deaths  
due to malignancy

● 9 due to suicide

● 5 due to cardiac

● 3 due to trauma

● 10 due to other causes

# RACGP White Book

## Specific populations

### Pregnant women

GPs involved in obstetric or shared antenatal care need to be aware that pregnancy is a risk factor for intimate partner abuse. Evidence suggests that four to nine women in every 100 pregnant women are abused.<sup>[44](#)</sup>

We ask pregnant patients about smoking, alcohol and breastfeeding, and we also need to screen for intimate partner abuse.<sup>[3,2](#)</sup>

For many women, pregnancy and the post partum period exacerbates the violence and threats within their relationship.<sup>[45](#)</sup> For some, pregnancy may even provoke it. A violent and jealous partner may resent the pregnancy because he is not prepared to 'share' her. There may be financial or sexual pressures, which are compounded by the pregnancy.

Abused pregnant women are twice as likely to miscarry than non-abused pregnant women. An abusive partner will often target the breasts, stomach and genitals of their pregnant partner.<sup>[3](#)</sup> Often the abuse will start with the first pregnancy, and as a result the woman may avoid prenatal check-ups. Women who do not seek antenatal care until the third trimester should raise suspicion.

Consider asking about intimate partner abuse in the antenatal period.<sup>[3](#)</sup>

# DV & MH Question ?

*"In addition to the blood tests and ultrasound scans we recommend in pregnancy, we ask every woman questions about how she is feeling and if she is safe.*

*Anxiety, depression and domestic violence are common conditions and they may occur for the first time or get worse in pregnancy."*

## R u ok ?



# “Are you safe?”

**Table 3. Questions and statements to make if you suspect intimate partner abuse**

- Has your partner ever physically threatened or hurt you?
- Is there a lot of tension in your relationship? How do you resolve arguments?
- Sometimes partners react strongly in arguments and use physical force. Is this happening to you?
- Are you afraid of your partner? Have you ever been afraid of any partner?
- Have you ever felt unsafe in the past?
- Violence is very common in the home. I ask a lot of my patients about abuse because no-one should have to live in fear of their partners.

**Table 5. Possible validation statements if a patient discloses intimate partner abuse**

- Everyone deserves to feel safe at home
- You don't deserve to be hit or hurt and it is not your fault
- I am concerned about your safety and wellbeing
- You are not alone; I will be with you through this, whatever you decide. Help is available
- You are not to blame; abuse is common and happens in all types of relationships
- Abuse can affect your health (and that of your children).

## Domestic and Family Violence (DFV) Local Link

- Brisbane South PHN initiative to help primary health care become part of an integrated system response to domestic & family violence
- The DFV Local Link offers a one-point of referral for patients affected by DFV & can provide advice & support for general practices
- Patients can be referred to the DFV Local Link if they are affected by DFV and are a patient of a general practice in Brisbane, Logan, Redlands or Beaudesert. More information and contact details for your DFV Local Link are found at <https://bsphn.org.au/support/for-your-patients-clients/domestic-and-family-violence/>
- The DFV Local Link support referred patients by conducting risk assessments, providing advice on next steps, and connecting them with supports and services. The Brisbane DFV Local Link also provides case work support to patients.

Landline: 3013 6035  
Hannah's Mobile: 0488-180-590  
Summer's Mobile: 0419-757-257

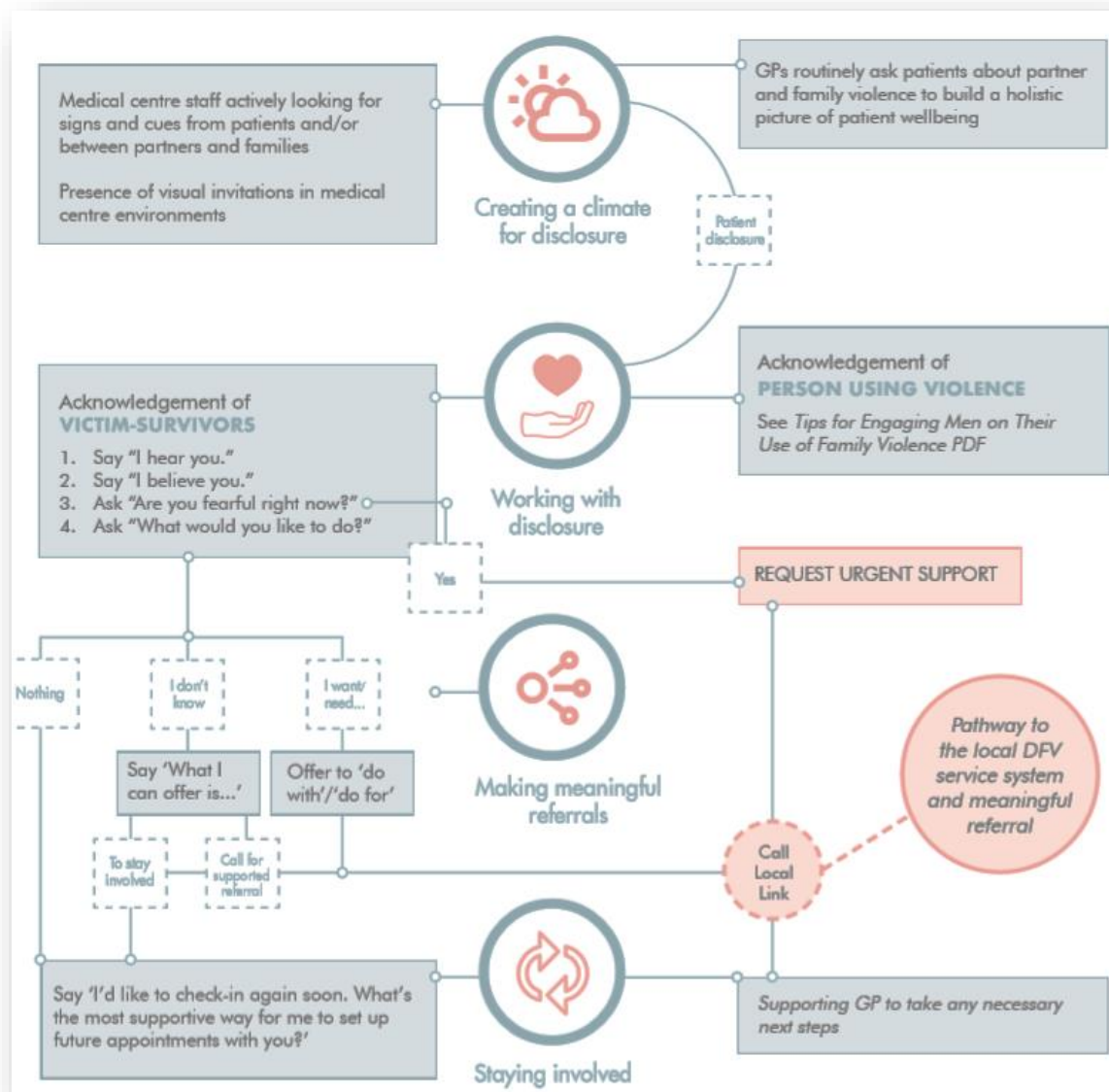
Contact your Brisbane DFV Local Link:  
[bdvslocallink@micahprojects.org.au](mailto:bdvslocallink@micahprojects.org.au)



Recognise  
Respond  
Refer

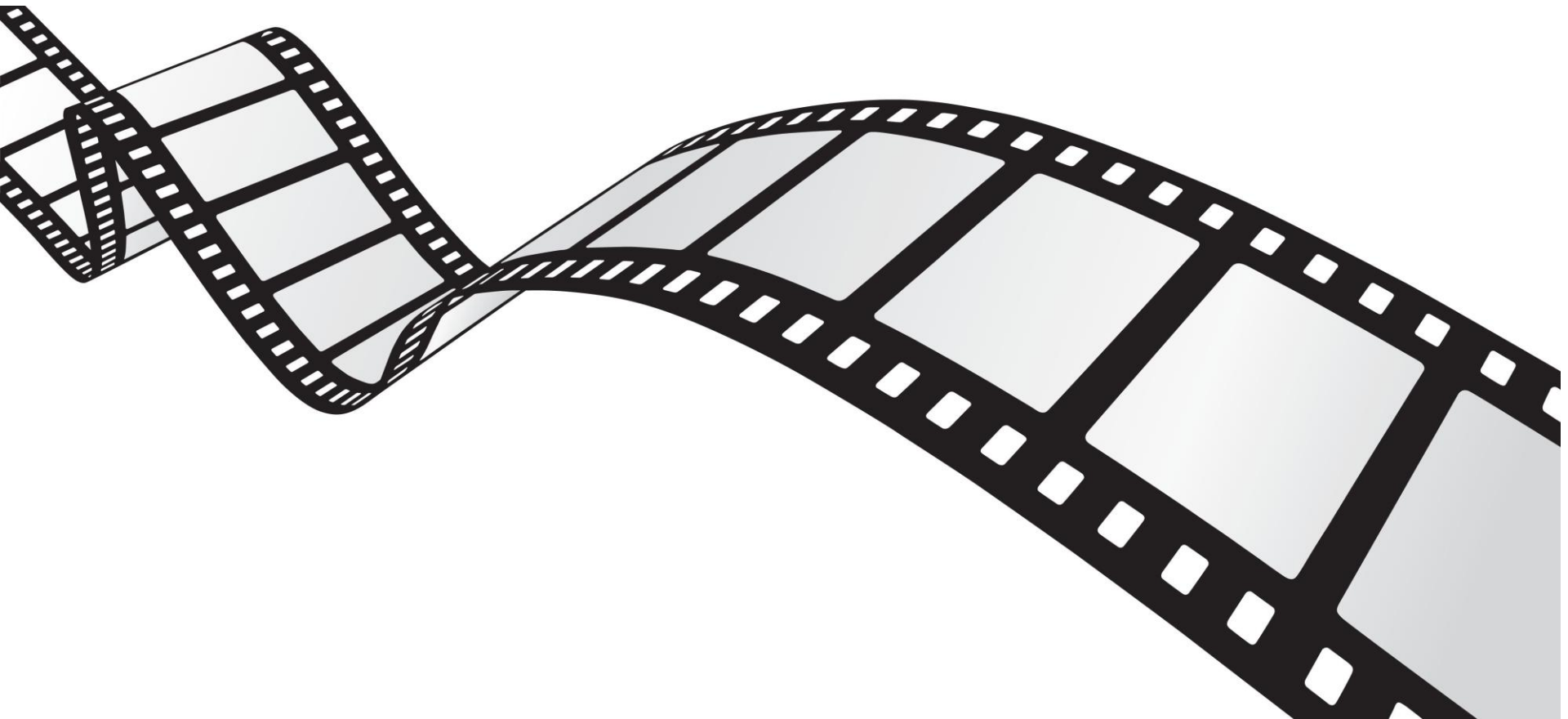


# Mater Mothers Hospital; Virtual Alignment 3

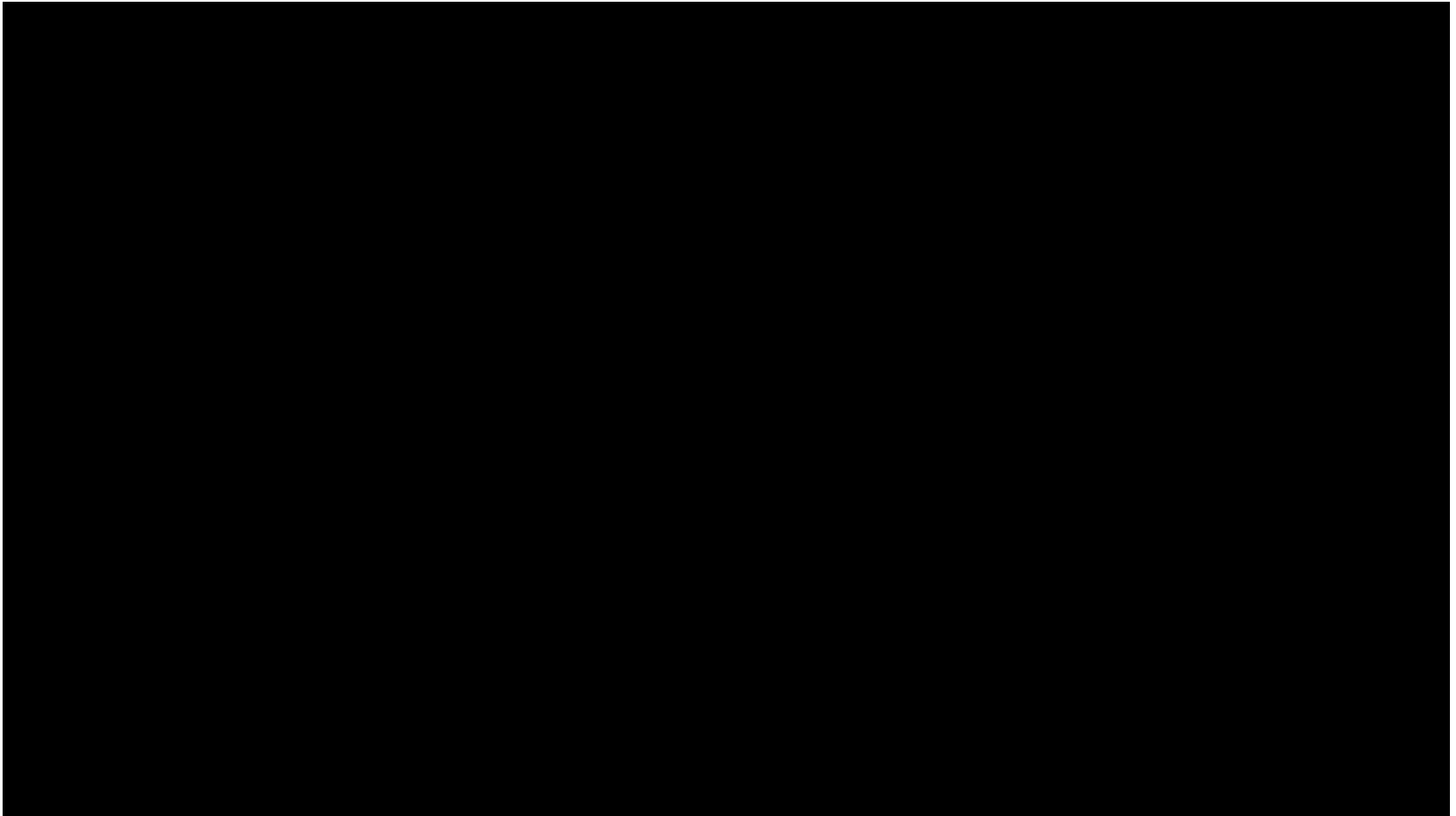


# Alignment 3

Break - we resume at 11:00

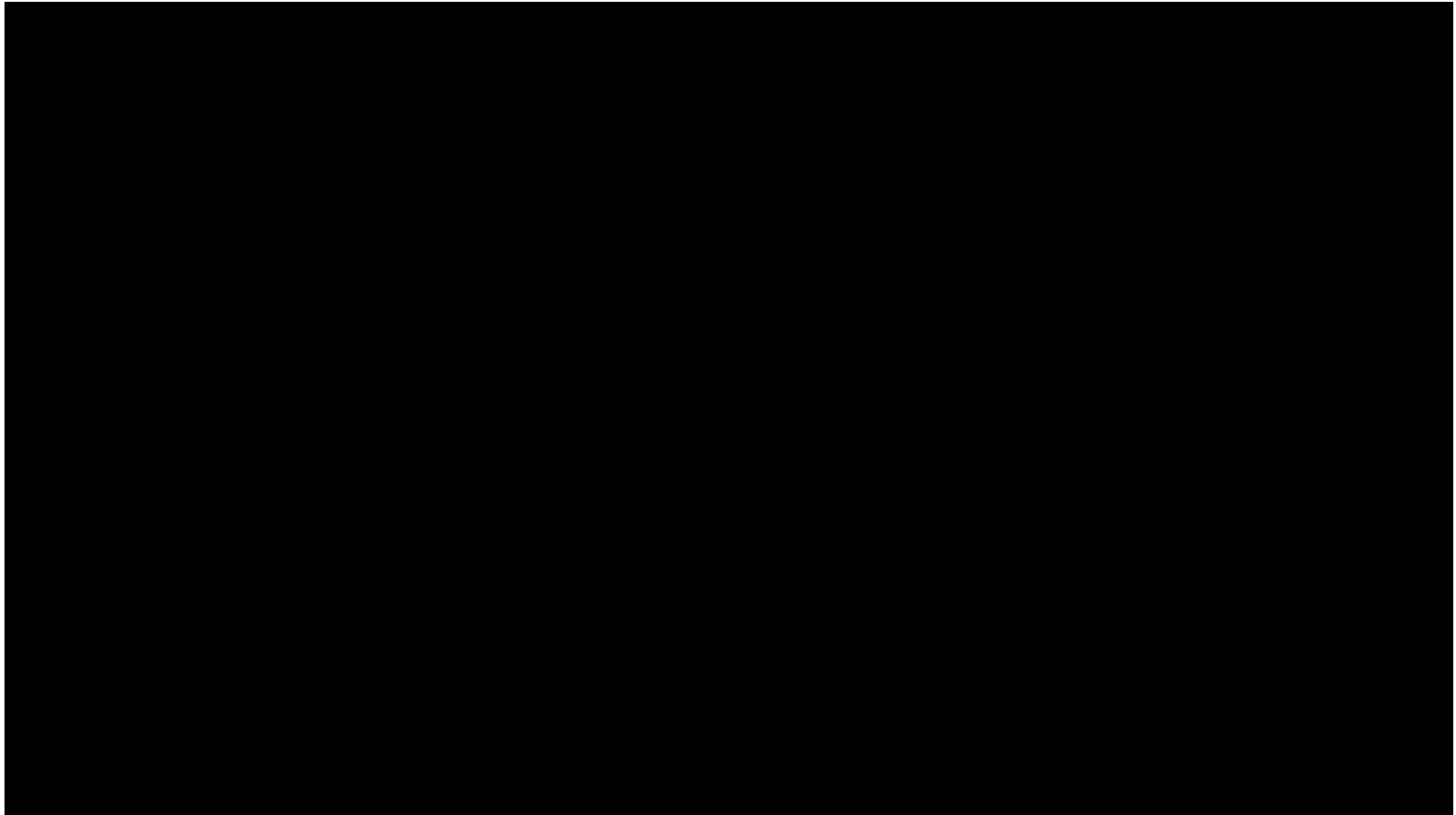


# Parenting Support Service



Mater Mothers Hospital; Virtual Alignment 3

# MMH Modes of Care



# RSV Research

