



Maternal, child and family health nursing position statement

1. Purpose

This position statement sets out the actions the Australian Nursing and Midwifery Federation (ANMF) considers governments, employers and nurses must take to support and advance the role of MCFH nurses and deliver improved health outcomes for individual families and communities. It should be read with the ANMF position statements: *Continuing professional development*; *Clinical (reflective) supervision for nurses and midwives*; and *Credentiailling*.

2. Definitions

Maternal, child and family health (MCFH) nurses are registered by the Nursing and Midwifery Board of Australia (NMBA). They provide primary health care to families with infants or children between 0-6 years of age to help them achieve the best start to life and to generate positive public health outcomes.

3. Context

MCFH nurses are essential and leading providers of primary health care to families with infants and young children. They provide comprehensive nursing care that includes:

- assessing and monitoring the health and wellbeing across multiple domains of infants and children between 0 and 6 years of age; and the health and wellbeing of their mothers; fathers; and families
- planning, providing, and evaluating responsive nursing care
- developing trusting therapeutic relationships with families and infants and broader health networks to provide that care.

By extending and supporting the role of MCFH nurses, governments and employers will improve individual and community health outcomes.

4. Position

It is the position of the ANMF that:

1. The early years are a crucial developmental phase for infants, young children, and families and access to primary health care through MCFH nursing during this phase is essential.
2. Governments must provide sufficient funding to ensure all families and infants have access to MCFH nursing care during this key developmental phase.
3. MCFH nursing must be provided by nurses or midwives with additional qualifications in MCFH nursing that align with the legislative, regulatory, professional and industrial frameworks governing their practice in their state or territory.
4. Governments must ensure:
 - nurses with the requisite qualifications who wish to work in MCFH roles are registered as MCFH nurses with the NMBA
 - additional credentiailling of MCFH nurses is not required.
5. Governments must take practical steps to increase workforce capacity and capability by supporting pathways for MCFH nurses to progress to nurse practitioners. This will enable MCFH nurses to make direct referrals to the professionals and services necessary to support each family, and in so doing enable integrated, collaborative, and less fragmented care for families with infants and young children.



6. Governments must fund best practice clinical (reflective) supervision for all MCFH nurses working in this context of practice.
7. Governments must:
 - support national data collection about infants, young children, parents and families to promote excellence in care and optimal outcomes by identifying gaps in service provision
 - support interventions and programs incorporated into MCFH nursing practice.

Employer responsibilities

It is the position of the ANMF that:

8. The term 'nurse' is a protected title under the Health Practitioner National Law.¹ All MCFH roles that include the title 'nurse' must be filled by a registered nurse or midwife, with the appropriate qualifications.
9. Employers should help MCFH nurses meet their continuing professional development (CPD) obligations by funding:
 - study and conference leave
 - staff replacement for nurses on study leave
 - scholarships and bursaries to help with the cost of CPD.
10. Employers must remunerate MCFH nurses as advanced practitioners and recognise their additional qualifications even if those qualifications are not mandatory where they practice.

MCFH nurse responsibilities

It is the position of the ANMF that:

11. All nurses have a professional responsibility to maintain competence relevant to their context of practice.
12. MCFH nurses must undertake CPD relevant to their context of practice and maintain a record as per the NMBA requirements.
13. MCFH nurses should consider further education in maternal health; lactation; infant and childhood nutrition; perinatal mental health; infant mental health; counselling; family violence; family planning; and vaccination.

5. Position statement management

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¹ Nursing and Midwifery Board of Australia. 2019. *Fact sheet: The use of health practitioner protected titles*. Available at <https://www.nursingmidwiferyboard.gov.au/codes-guidelines-statements/faq/the-use-of-health-practitioner-protected-titles.aspx>.