Poipoia to pepe whānau mā
FAMILIES CHERISHING, EMBRACING & NURTURING OUR BABIES

WHANGANUI REGION BIRTHS

728 BIRTHS IN WHANGANUI HOSPITAL/RURAL HEALTH SERVICE 2018/19
71.7% of women registered with a Lead Maternity Care (LMC) in the first trimester of pregnancy
2017 INDICATOR REPORT

CUSTOMER SATISFACTION FEEDBACK
71% - very satisfied
22% - satisfied

“I intentionally stayed in Whanganui instead of moving to Waikato so I could give birth here. The unit is amazing and the staff are excellent. Thanks for your care.”

WHANGANUI HOSPITAL BIRTHS 2017/18
12.8% Emergency Caesarean
9.7% Elective Caesarean
3.9% Vacuum delivery
0.7% Forceps
0.6% Breech birth
1.0% Unidentified

WHANGANUI REGION BIRTHS

MATERNITY SERVICES IN THE WDHB REGION

WDHB REGION
9,742 KM²
TOTAL POPN
63,600

MOTHERS’ ETHNICITY BY AGE GROUP

71.7% of women registered with a Lead Maternity Care (LMC) in the first trimester of pregnancy

WHANGANUI Population 53,740
Marton Population 4,860
Ohakune Population 1,140
Taihape Population 1,660
Waimarino Health Centre
Primary care
Wainamu
Population 820
RAETIHI Population 1,150
TAIHAPE Population 1,660
Ohakune Population 1,140
Whanganui Hospital
Secondary care
Tahepa Health Ltd
Primary care

WDHB REGION

PREGNANCY & PARENTING PROGRAMMES

HAPŪ ME TE WHĀNAU TAMARIKI

Historically Whanganui has had a stable midwifery workforce however in late 2018 early 2019 there were a number of retirements and midwives leaving the area. This has impacted our ability to service our local population. In order to ensure local wahine have access to care, WDHB is working with Whanganui Regional Health Network to establish a primary care team.

A range of pregnancy and parenting programmes are run by the Whanganui Regional Health Network’s (WRHN) pregnancy and parenting coordinator.

Over 2018 there has been an increase in Māori wahine and their partners attending classes, typically attending the Hapū Wahine day but in some cases returning to complete longer classes.

The Hapū Wahine day class provides tikanga-based support in collaboration with Te Haupapa Ora Māori Health Service. Participants are transported to and from classes and offered maternal immunisations on site as well as a delivery suite tour and a nutritious lunch. Each client is screened and speakers are tailored to what is important for the group.

“Whanganui Hospital Maternity Services helped take care of me when it was impossible to take care of myself after having a c-section. The communication between shifts seemed vastly improved compared to around two years ago (my last contact with the Maternity Ward). This was awesome to see.”

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PIRIPHO/LACTATION CONSULTANTS

Whanganui DHB has an International Board of Lactation Consultant (IBLC) who holds two half-day clinics each week. The lactation consultant reports they have seen fewer women on the postnatal ward in the past year but have seen more in clinics and outside of clinic hours. The introduction of the guideline for administration of 40% dextrose (gel) for neonatal hypoglycaemia appears to have reduced the number of babies being separated from their mothers and admitted to Special Baby Care Unit. In the first six months of 2019 there were 26 babies treated and only six required admission to SCBU.