

## FEATURE



# RETURNING TO WORK AFTER MATERNITY LEAVE

Returning to work after maternity leave can be challenging, writes mother of two Dr Kushlani S. K. Stevenson (FANZCA).

There are many reasons why anaesthetists may spend significant periods away from their normal working environment; those taking maternity leave form the largest group and most expect to return to normal practice within a short period of time.

I returned to work following brief periods of maternity leave after the arrival of my children. I planned meticulously beforehand, but tremendous upheaval follows the arrival of your child and any plans may not remain intact. It is best to keep plans flexible so they can be adapted to your child and your individual

circumstances. In this article I have included suggestions to facilitate a smooth return to work and links to resources to help with planning.

It is hard to know when to resume working. Finances, your stage of training (or experience as a specialist) and the demands of balancing your private and public work may influence your return. An early return to work (less than six months after birth) impacts less upon self-confidence in clinical practice, although balancing the demands of breastfeeding, sleep deprivation and on-call commitments can be challenging. Returning to work later (more than six months after birth) means that breastfeeding is not as much of a drain as it may have been earlier and your baby is

more likely to be settled and sleeping well. However, with a later return to work there may be issues with separation anxiety in your child and confidence in your clinical competence.

For trainees, rotations may determine the timing of any interruptions and variations to your training. These need to be coordinated prospectively with ANZCA through the Director of Professional Affairs (assessor). If you take more than one year off from training, subsequent training must include at least one continuous year of supervised training. If you are a specialist who has been absent from practising clinical anaesthesia for more than 12 months, ANZCA recommends participation in their Practice Re-entry Program.

Childcare is a significant factor influencing when and how to return to work. Your workplace may provide long daycare facilities, but there may be a long waiting list. As a trainee you may not even know where you will be working in several months' time. Childcare facilities close to work will enable you to drop off and pick up your child closer to your own start and finish times. However, for most of us this means a very long and tiring day for both parent and child.

A nanny may be a better option, especially if you have more than one child. Nannies can fit in with your schedule and there is no rush to get the children up and out by a certain time. However, it can be hard to find the best person for you and your family. You will not be eligible for the childcare rebate with a nanny (unless it is through certain nanny agencies), so it would be a significant drain on your finances, especially if you are a trainee.

Family and friends can be helpful and leaving your child with someone you know and trust is a huge help with the transition back to work, but it is not an option available to everyone.

If you are breastfeeding, and intend to continue after your return to work, then you need to prepare for expressing milk and ensure your baby will take a bottle. Returning to work part-time helps with maintaining your supply as there is not as much pressure to produce an adequate amount of milk while you are away from your baby.

I recommend an electric breast pump, as well as getting your baby used to taking a bottle early. It is not always easy to express breastmilk and it helps if you are not stressed. You need to practise at home first and find somewhere private at work where you feel comfortable. It would help if you can visit the workplace and make a plan for this before you start work. If your baby is on-site, you may be able to visit the childcare facility for feeds. If you

have a nanny or family member caring for your child, your child may be able to be brought in to you. The Australian Breastfeeding Association provides some excellent resources about breastfeeding and work.

Private practice has its own challenges. It is hard to find someone who is not only able and available to cover your lists for you, but someone who can also be relied upon to return those lists to you at the end of your maternity leave. This leads to many of us returning to our private lists earlier than our public lists or giving up the private work entirely. It helps to have an understanding surgeon and also to return to a morning or afternoon session as opposed to a full day. That way factors such as expressing at multiple locations will be less of a concern.

A supportive family is invaluable for a successful return to work. Discuss your plans well ahead of your start date and ensure that you divide up household responsibilities early to minimise stress.

Finally, ask your colleagues what they did—what worked for them and what would they not do again? You may feel you are inconveniencing them when you first return to work, but most of them have been through it themselves, either personally or through their spouse; in return they will get a motivated, organised and happy colleague with a raft of valuable skills to share.

My main message is to do what is right for you and your family—that way you get to enjoy your job and your child, and be an asset to your employer and colleagues.

## ACKNOWLEDGEMENTS

I would like to acknowledge my friends and colleagues who have been great resources for me—for helping me with my return to work from maternity leave and for their input into this article.

## USEFUL RESOURCES

- Australian and New Zealand College of Anaesthetists. Professional Standard 50: Recommendations on Practice Re-Entry for a Specialist Anaesthetist. From <http://www.anzca.edu.au/resources/professional-documents/documents/professional-standards/professional-standards-50.html>.
- Australian and New Zealand College of Anaesthetists. Special Requests. From <http://www.anzca.edu.au/training/2004-training-program/special-requests>.
- Raising Children Network. Returning to Work: A Guide. From [http://raisingchildren.net.au/articles/returning\\_to\\_work.html](http://raisingchildren.net.au/articles/returning_to_work.html).
- Australian Government Fair Work Ombudsman. Returning to Work. From <http://www.fairwork.gov.au/leave/parental-leave/pages/returning-to-work.aspx>.
- Australian Breastfeeding Association. Breastfeeding and Work. From <http://www.breastfeeding.asn.au/bf-info/breastfeeding-and-work>.
- Hill E. So you want to be a medical mum? London, UK: Oxford University Press 2008.
- Royal College of Anaesthetists. Returning to work after a period of absence. From <http://www.rcoa.ac.uk/node/771>.
- Royal College of Anaesthetists. A structured return to work—who, when and why? From <http://www.rcoa.ac.uk/system/files/CSQ-Bulletin76.pdf>.