

## Module Overview

**Please note: This module must be read in conjunction with the [Fundamentals of the Framework](#) (including glossary and acronym list)**

The content for this module is based on the *SA Health Standards for Maternal and Neonatal Services in South Australia 2015*. These standards were developed in accordance with contemporary professional quality and safety standards and establish the minimum standards for the provision of maternity and neonatal services in South Australia. It is recommended that this module be read in conjunction with these standards in their entirety.

The six levels of service delineation defined in this module rely upon the regionalisation of services, based upon population needs, and management within a coordinated, cooperative system inclusive of the health units and medical staff involved. The degree of complexity of the maternity and neonatal care each health service is capable of providing is identified in these module, with the aim to:

- > define relevant areas of responsibility for individual health units within a comprehensive health care system
- > define the scope of safe clinical care complimentary of the complexity of care required by the woman and/or her newborn
- > establish referral practices and retrieval transport services enabling the timely transfer of care between different organisations as determined by the patient's complexity of care needs
- > establish the necessary professional and technical infrastructure within the health services to support the defined systems
- > plan and develop services to the level necessary to meet the needs of the relevant catchment's population
- > optimise the continuity of care across the system
- > provide an objective, standardised system for describing the scope and level of maternity and neonatal services provided by a particular unit and/or organisation

## Service Requirements

In addition to the requirements outlined in the [Fundamentals of the Framework](#), specific service requirements include:

- > compliance with SA Health policy directives and guidelines that are referenced at:
  - > [SA Health Policy Directives](#)
  - > [SA Health Policy Guidelines](#)
  - > [SA Health Clinical Directives and Guidelines](#)
  - > [SA Health Perinatal Practice Guidelines](#)

---

## Risk Management

There is a progressive level of risk for pregnant women and their fetus, ranging from low to very high. Pregnant women should have their perinatal care managed through or by a health unit that has a compliment of appropriately credentialed health practitioners, capable of providing care and services to meet the needs of the woman. Women with risk factors requiring more complex care should have their antenatal management plan modified accordingly. Complementing the range and scope of maternity and neonatal services available in South Australia is an expectation that every site providing perinatal services should conform to the principles of best practice and ensure services are maintained as outlined in the CSCF.

## Workforce Requirements

The CSCF does not prescribe staffing ratios, absolute skill mix, or clerical and/or administration workforce requirements for a team providing a service, as these are best determined locally and in accordance with relevant industrial instruments. Where minimum standards, guidelines or benchmarks are available, the requirements outlined in this module should be considered as a guide only. All staffing requirements should be read in conjunction with the *Health Care Act 2008*, Awards and relevant Enterprise Agreements including, but not limited to:

- > SA Health Salaried Medical Officers Enterprise Agreement 2013
- > SA Health Visiting Medical Specialists Enterprise Agreement 2012
- > SA Health Clinical Academics Enterprise Agreement 2014
- > Nursing/Midwifery (South Australian Public Sector) Enterprise Agreement 2013
- > SA Ambulance Service Enterprise Agreement 2011
- > SA Public Sector Wages Parity Enterprise Agreement Salaried 2014

It is fundamental that the maternity services staff, facilities and equipment at each level of service be appropriate to optimise the health outcomes for both the woman and her infant. The workforce engaged to provide the designated perinatal services at each health service should be appropriately credentialed within the defined competencies and professional standards of practice as indicated by their specific professional body. It is acknowledged that the availability and competence of the maternity services workforce, resource allocation and historical practices will influence the range of models of care that can be offered at any one maternity service. The workforce at health services providing less complex care must have clinical capabilities to support the woman and/or neonate's care until assistance from the more qualified perinatal staff and/or the retrieval services is available. All nurses, midwives, registered medical officers, obstetricians, anaesthetists, paediatricians, neonatologists and other health care staff should be credentialed to provide their clinical practice according to their relevant professional standards and/or the employing organisation's policies.

| Maternity & Neonatal                  | Level 1  | Level 2  | Level 3   | Level 4   | Level 5   | Level 6  |
|---------------------------------------|--|--|---|---|---|--|
| <b>Service description - Maternal</b> | <ul style="list-style-type: none"> <li>&gt; No routine management of the pregnant woman, but will have appropriate formal policy/protocols to guide staff, in the safe, local management of the woman presenting with an unexpected emergency in pregnancy.</li> <li>&gt; Capacity to provide emergency care to support obstetric women until her transfer of care or a retrieval service is available.</li> <li>&gt; Some local registered medical officer services may be available in the local area for the management of the postpartum women with no identified risk factors.</li> <li>&gt; In some instances the postpartum women may be supported by a community midwifery service.</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Capacity to manage the care of the 'low risk' pregnant woman during the antenatal and postnatal periods.</li> <li>&gt; Will have formal policy/ protocols to guide staff, in the safe, local management of the pregnant woman presenting with 'risk factors', in the intrapartum period or with an unexpected emergency until her transfer of care or a retrieval service is available</li> <li>&gt; In some instances the 'low risk' postpartum women may be supported by a community midwifery service.</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Capacity to provide safe care for the woman with a singleton pregnancy with identified as 'low risk' at a gestation <math>\geq 37</math> weeks</li> <li>&gt; Will provide a range of models of maternity care that complement the demographics and needs of the local community: these may include the South Australian GP Obstetric Shared Care Program<sup>11</sup> and midwifery led models of care</li> <li>&gt; Will have formal policy/ protocols to guide staff, in the safe, appropriate, local management of the obstetric woman &lt;37 weeks gestation, with high order pregnancy, with risk factors or complications, until her transfer of care or a retrieval service is available</li> <li>&gt; Will have access to a community midwifery service</li> <li>&gt; Will have access to a breastfeeding support.</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Capacity to provide safe care for the woman with a singleton pregnancy or a twin pregnancy with 'low risk' factors and/or minor complications <math>\geq 34</math> weeks gestation.</li> <li>&gt; Will have access to a community midwifery services</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Will have access to Adult ICU</li> <li>&gt; Capacity to provide safe care for the women with 'low-high' risk factors with a singleton or twin pregnancy at <math>\geq 32</math> weeks gestation, including the care for most medical conditions and pregnancy related illnesses.</li> <li>&gt; Will have access to a community midwifery service</li> <li>&gt; Will have access to breastfeeding support</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Will have access to Adult ICU onsite</li> <li>&gt; Capacity to provide comprehensive multidisciplinary management of the 'low - high risk' pregnant women at any gestation and including any higher order multiple pregnancy</li> <li>&gt; Will have access to a community midwifery service</li> <li>&gt; Will have access to onsite breastfeeding support and lactation consultancy</li> </ul> |

| Maternity & Neonatal                         | Level 1   | Level 2  | Level 3  | Level 4  | Level 5   | Level 6   |
|--|---|--|--|--|---|---|
| <p><b>Service description - Neonatal</b></p> | <ul style="list-style-type: none"> <li>&gt; No routine management of the neonate.</li> <li>&gt; Some local registered medical officer services may be available in the area for the management of the healthy newborn baby who has no identified risk factors</li> <li>&gt; In some instances, the healthy newborn may be supported by a community midwifery service</li> </ul> | <ul style="list-style-type: none"> <li>&gt; No routine management of the neonate</li> <li>&gt; Capacity to provide emergency care to support the sick neonate until the retrieval service arrives</li> <li>&gt; Some local registered medical practitioner(s) may be available in the area for the management of the healthy newborn baby who has no identified risk factors</li> <li>&gt; In some instances, the healthy newborn may be supported by a community midwifery service</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Capacity to provide safe care for the singleton neonate that weighs <math>\geq 2500g</math> at birth and the neonate requiring convalescent care <math>\geq 36</math>(corrected gestation) weeks, who weighs <math>&gt;2000g</math> when supported by Neonatologist/Paediatrician consultant advice from a Level 4,5 or 6 service</li> <li>&gt; Will have formal policy/ protocols to guide staff, in the safe, appropriate, local management of the neonate with a birth weight <math>\geq 2500g</math>, and the neonate requiring convalescent care <math>\geq 36</math>(corrected gestation) weeks, who weighs <math>&gt;2000g</math> when supported by Neonatologist/Paediatrician consultant advice from a Level 4,5 or 6 service</li> <li>&gt; Will have formal policy/ protocols to guide staff, in the safe, appropriate, local management of the neonate with a birth weight <math>&lt;2500g</math>, and/or any neonate with risk factors or complications, until transfer of care or a retrieval service is available</li> <li>&gt; Local registered medical practitioner(s) available in the area for the management of the healthy newborn baby who has no identified risk factors</li> <li>&gt; In some instances, the healthy newborn may be supported by a community midwifery service</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Special Care Nursery onsite</li> <li>&gt; Capacity to provide safe care for the neonate that weighs <math>\geq 2000g</math> at birth and the neonate requiring convalescent care <math>\geq 34</math> weeks gestation, who weighs <math>&gt;1700g</math> when supported by Neonatologist/ Paediatrician consultant advice from a Level 5 or 6 neonate service.</li> <li>&gt; Capacity to provide safe care for neonates who can be managed in a bassinet or cot, and/or require incubator care for short term transitional problems or convalescing after an acute illness which can reasonably be expected to resolve. For example: <ul style="list-style-type: none"> <li>• respiratory distress requiring oxygen <math>&lt; 30\%</math> oxygen for <math>\leq 4</math> hours, (longer duration or higher FiO<sub>2</sub> requires consultation with Level 6 neonatal service)</li> <li>• minor additional care requirements, such as IV access for antibiotics</li> </ul> </li> <li>&gt; Local registered medical officer available in the area for the management of the healthy newborn baby who has no identified risk factors</li> <li>&gt; In some instances, the healthy newborn may be supported by a community midwifery service</li> </ul> | <ul style="list-style-type: none"> <li>&gt; NICU or Special Care Nursery onsite</li> <li>&gt; Capacity to provide safe care for the neonate <math>\geq 32</math> weeks that weighs <math>\geq 1500g</math> at birth and the stable neonate(s) including those transferred for convalescence care <math>\geq 32</math> (corrected gestation) weeks that weighs <math>\geq 1350g</math> when supported with consultant advice regarding their ongoing management provided by a Neonatologist/ Paediatrician from a Level 6 service</li> <li>&gt; Capacity to provide safe care for neonates who can be managed in a bassinet or cot, and/or require incubator care for complications requiring: <ul style="list-style-type: none"> <li>• oxygen <math>\leq 35\%</math> oxygen. Higher FiO<sub>2</sub> requires consultation with Level 6 NICU consultant,</li> <li>• cardiorespiratory monitoring,</li> <li>• additional care requirements, such as IV access for infusion, IV therapy or antibiotics</li> </ul> </li> <li>&gt; Capacity to provide safe care for neonates that: <ul style="list-style-type: none"> <li>• has a birth weight <math>\geq 1500g</math>,</li> <li>• require more complex care until transfer of care or a retrieval service is available, and those</li> <li>• require convalescence care when <math>\geq 32</math> (corrected gestation) weeks and weighs <math>\geq 1350g</math>; when supported with consultant advice regarding their ongoing management that is provided by a Neonatologist from a Level 6 neonate service.</li> </ul> </li> <li>&gt; A community neonatal nurse service is available to support the neonate after discharge</li> </ul> | <ul style="list-style-type: none"> <li>&gt; NICU onsite</li> <li>&gt; Capacity to provide multidisciplinary comprehensive management of the 'low- high risk' neonate including most conditions at any gestation and those from higher order pregnancy, including the transfer of care of those neonates requiring some cardiac and other complex surgery to alternate level 6 sites</li> <li>&gt; A community neonatal nurse service is available to support the neonate who has been in NICU/SCUB after discharge</li> </ul> |

| Maternity & Neonatal        | Level 1   | Level 2  | Level 3  | Level 4  | Level 5  | Level 6  |
|-----------------------------|---|--|--|--|--|--|
| <b>Service requirements</b> | <p><b>Birth rooms</b></p> <ul style="list-style-type: none"> <li>&gt; No designated maternity care facilities</li> <li>&gt; Emergency resuscitation equipment available 24 hours per day, seven days per week.</li> </ul> <p><b>Nursery</b></p> <ul style="list-style-type: none"> <li>&gt; No designated neonatal care facilities</li> <li>&gt; Emergency resuscitation equipment available 24 hours per day, seven days per week</li> </ul> <p><b>Operating rooms</b></p> <ul style="list-style-type: none"> <li>&gt; No designated operating room facilities</li> </ul> <p><b>ICU</b></p> <ul style="list-style-type: none"> <li>&gt; No local intensive care services available.</li> </ul> | <p><b>Birth rooms</b></p> <ul style="list-style-type: none"> <li>&gt; No designated maternity care facilities</li> <li>&gt; Emergency resuscitation equipment available 24 hours per day, seven days per week</li> </ul> <p><b>Nursery</b></p> <ul style="list-style-type: none"> <li>&gt; No designated neonatal care facilities</li> <li>&gt; Emergency resuscitation equipment available 24 hours per day, seven days per week</li> </ul> <p><b>Operating rooms</b></p> <ul style="list-style-type: none"> <li>&gt; No designated operating room facilities</li> </ul> <p><b>ICU</b></p> <ul style="list-style-type: none"> <li>&gt; No local intensive care services available.</li> </ul> | <p><b>Birth rooms</b></p> <ul style="list-style-type: none"> <li>&gt; Designated birthing rooms in the health unit</li> <li>&gt; Maternity unit is equipped with cardiocograph monitoring for antenatal &amp; intrapartum care</li> <li>&gt; Has an ultrasound machine available for use in the maternity unit including the labour and birth suite/ward/room</li> <li>&gt; Emergency adult resuscitation equipment is in close proximity to the maternity unit and is available 24 hours per day, seven days per week.</li> </ul> <p><b>Maternity beds</b></p> <ul style="list-style-type: none"> <li>&gt; A range of antenatal and postnatal care facilities with allocated inpatient maternity beds</li> </ul> <p><b>Nursery</b></p> <ul style="list-style-type: none"> <li>&gt; Designated neonatal care facilities for transitional and stabilisation of the unexpectedly sick singleton neonate</li> <li>&gt; Nursery equipped with <ul style="list-style-type: none"> <li>• radiant heater</li> <li>• radiant heater</li> <li>• convection- warmed heater</li> <li>• oxygen analyser</li> <li>• pulse oximeter</li> <li>• phototherapy lamp</li> <li>• 'point of care' blood sugar analysis machine</li> </ul> </li> <li>&gt; Emergency neonatal resuscitation equipment available 24 hours per day, seven days per week</li> </ul> | <p><b>Birth rooms</b></p> <ul style="list-style-type: none"> <li>&gt; Designated birthing rooms in the health unit</li> <li>&gt; Equipped with cardiocograph monitoring for antenatal &amp; intrapartum care, which will include fetal scalp blood sampling</li> <li>&gt; Has an ultrasound machine available for use in the maternity unit including the labour and birth suite/ward/room</li> <li>&gt; Emergency adult resuscitation equipment is in close proximity to the maternity unit and is available 24 hours per day, seven days per week</li> </ul> <p><b>Maternity beds</b></p> <ul style="list-style-type: none"> <li>&gt; A range of antenatal, intrapartum and postnatal care facilities with allocated inpatient maternity beds</li> </ul> <p><b>Nursery</b></p> <ul style="list-style-type: none"> <li>&gt; Designated special care nursery for transitional care and stabilisation of the unexpectedly sick neonate and also for the care of the uncomplicated convalescent preterm and term infants</li> <li>&gt; Nursery equipped with <ul style="list-style-type: none"> <li>• radiant heater</li> <li>• convection- warmed heater</li> <li>• incubator for thermoregulatory care</li> <li>• oxygen therapy for short term oxygenation &lt; 4 hours via humidified head box or cot oxygen &lt; 30% FiO<sub>2</sub>. Longer FiO<sub>2</sub> requires consultation with level 6 NICU</li> </ul> </li> </ul> | <p><b>Birth rooms</b></p> <ul style="list-style-type: none"> <li>&gt; Designated birthing rooms in the health unit</li> <li>&gt; Equipped with cardiocograph monitoring for antenatal &amp; intrapartum care, which includes fetal scalp blood sampling</li> <li>&gt; Have an ultrasound machine(s) located in the birth suite</li> <li>&gt; Emergency adult resuscitation equipment is in close proximity to the maternity unit and is available 24 hours per day, seven days per week</li> </ul> <p><b>Maternity beds</b></p> <ul style="list-style-type: none"> <li>&gt; Allocated antenatal, intrapartum and postnatal care facilities within a designated maternity/birthing unit</li> <li>&gt; Have adult high dependency unit on site and have access to adult intensive care services, which may be on site.</li> </ul> <p><b>Nursery</b></p> <ul style="list-style-type: none"> <li>&gt; Designated neonatal nursery with the capability of providing neonatal special care which is maintained in accordance with the Australasian Health Facilities Guidelines</li> <li>&gt; Nursery equipped with <ul style="list-style-type: none"> <li>• radiant heater</li> <li>• incubator for thermoregulatory care</li> <li>• oxygen therapy via humidified head box or cot oxygen &lt; 35% FiO<sub>2</sub>. (Higher FiO<sub>2</sub> requires consultation with a Neonatologist from a level 6 service)</li> </ul> </li> </ul> | <p><b>Birth rooms</b></p> <ul style="list-style-type: none"> <li>&gt; Designated birthing rooms in the health unit</li> <li>&gt; Equipped with cardiocograph monitoring for antenatal &amp; intrapartum care, which will include fetal scalp blood sampling</li> <li>&gt; Have ultrasound machine(s) located in the birth suite</li> <li>&gt; Emergency adult resuscitation equipment in the maternity unit and is available 24 hours per day, seven days per week</li> </ul> <p><b>Maternity beds</b></p> <ul style="list-style-type: none"> <li>&gt; Allocated antenatal, intrapartum and postnatal care facilities within a designated maternity/birthing</li> </ul> <p><b>Nursery</b></p> <ul style="list-style-type: none"> <li>&gt; Designated neonatal nursery with neonatal intensive care beds which are maintained in accordance with the Australasian Health Facility Guidelines<sup>16</sup></li> <li>&gt; Nursery equipped with: <ul style="list-style-type: none"> <li>• radiant heaters</li> <li>• incubators for thermoregulatory care</li> <li>• airway support suitable for comprehensive oxygen therapies which includes continuous airway pressure, high frequency ventilation, nitric oxide administration and mechanical ventilation</li> <li>• oxygen analysers for continuous inspired oxygen therapy</li> </ul> </li> </ul> |

| Maternity & Neonatal                       | Level 1 | Level 2 | Level 3   | Level 4  | Level 5   | Level 6  |
|--|---------|---------|---|--|---|--|
| Service requirements<br><i>(continued)</i> |         |         | <p><b>Operating rooms</b></p> <ul style="list-style-type: none"> <li>&gt; Will have operating room facilities available with 'on call' arrangements 24 hours per day, seven days per week, maintained in accordance with the relevant professional standards including the Australian College of Operating Rooms Standards<sup>15</sup></li> </ul> <p><b>ICU</b></p> <ul style="list-style-type: none"> <li>&gt; No local intensive care services available.</li> </ul> | <ul style="list-style-type: none"> <li>• oxygen analyser for continuous inspired oxygen therapy</li> <li>• pulse oximeter</li> <li>• phototherapy lamp</li> <li>• gavage feeding equipment</li> <li>• infusion pump for safe management IV therapy</li> <li>• point of care blood sugar analysis machine</li> </ul> <p>&gt; Emergency neonatal resuscitation equipment available 24 hours per day, seven days per week</p> <p><b>Operating rooms</b></p> <ul style="list-style-type: none"> <li>&gt; As per level 3</li> </ul> <p><b>ICU</b></p> <ul style="list-style-type: none"> <li>&gt; No local intensive care services available</li> </ul> | <ul style="list-style-type: none"> <li>• pulse oximeter</li> <li>• gavage feeding equipment</li> <li>• phototherapy lamp</li> <li>• cardiorespiratory monitoring</li> <li>• infusion pump for safe management of intravenous therapy or infusion</li> </ul> <p>&gt; Has immediate access to a blood gas machine for measurement of blood gas, plasma glucose and electrolytes</p> <p>&gt; Emergency neonatal resuscitation equipment available 24 hours per day, seven days per week</p> <p>&gt; Has neonatal special care services</p> <p><b>Operating rooms</b></p> <ul style="list-style-type: none"> <li>&gt; As per level 4</li> </ul> | <ul style="list-style-type: none"> <li>• electroencephalography, end tidal and transcutaneous CO2 monitoring</li> <li>• pulse oximeters</li> <li>• gavage feeding equipment</li> <li>• phototherapy lamps</li> <li>• cardiorespiratory monitoring for all patients</li> <li>• equipment for safe management IV therapies, arterial lines and central venous lines</li> <li>• equipment for controlled infusions, including syringe drivers and infusion pumps</li> <li>• parental nutrition equipment</li> <li>• peritoneal dialysis equipment</li> <li>• exchange transfusion equipment</li> <li>• therapeutic hypothermia equipment</li> </ul> <p>&gt; Has technical support staff to manage all of the equipment provided</p> <p>&gt; Has a blood gas machine for measurement of blood gas, plasma glucose and electrolytes available in the neonatal unit</p> <p>&gt; Emergency neonatal resuscitation equipment available 24 hours per day, seven days per week</p> <p><b>Operating rooms</b></p> <ul style="list-style-type: none"> <li>&gt; As per level 5</li> </ul> |

| Maternity & Neonatal          | Level 1   | Level 2  | Level 3   | Level 4   | Level 5   | Level 6   |
|-------------------------------|---|--|---|---|---|---|
| <b>Workforce requirements</b> | <p><b>Medical</b></p> <ul style="list-style-type: none"> <li>&gt; No requirement for Obstetrician</li> <li>&gt; General Practitioner(s) available</li> <li>&gt; No requirement for an Anaesthetists</li> <li>&gt; No requirement for Paediatrician</li> </ul> <p><b>Midwifery</b></p> <ul style="list-style-type: none"> <li>&gt; May or may not have registered midwives available</li> <li>&gt; May or may not have community midwives available</li> </ul> <p><b>Nursing</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; Registered nurses available</li> </ul> <p><b>Allied Health</b></p> <ul style="list-style-type: none"> <li>&gt; Have allied health staff available for perinatal care</li> </ul> | <p><b>Medical</b></p> <ul style="list-style-type: none"> <li>&gt; As per Level 1</li> </ul> <p><b>Midwifery</b></p> <ul style="list-style-type: none"> <li>&gt; Have registered midwives available</li> <li>&gt; May or may not have community midwives available</li> </ul> <p><b>Nursing</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; Registered nurses available</li> </ul> <p><b>Allied Health</b></p> <ul style="list-style-type: none"> <li>&gt; Limited allied health staff available and usually none designated to perinatal care but will have appropriate formal policy/protocols to guide staff, in the safe referral to specialist allied health services as required</li> </ul> | <p><b>Medical (Obstetric)</b></p> <ul style="list-style-type: none"> <li>&gt; No requirement for Obstetrician</li> </ul> <p><b>Medical (General Practice)</b></p> <ul style="list-style-type: none"> <li>&gt; Appropriately credentialed registered medical practitioner(s) available and able to be in attendance at the health unit within 60 minutes. No requirement for an Anaesthetists</li> <li>&gt; appropriately credentialed registered medical practitioner(s) rostered and available 24 hours per day, seven days per week and able to assist with a Category 1 Caesarean section and achieve birth within 60 minutes from booking the procedure. (one registered medical practitioner to perform the caesarean section, one to undertake the anaesthetic and one to attend to the neonate's needs immediate post-birth)</li> </ul> <p><b>Medical (Anaesthetics)</b></p> <ul style="list-style-type: none"> <li>&gt; Appropriately credentialed registered medical practitioner(s) (GP anaesthetist or specialist anaesthetist) available able to attend the health unit within 60 minutes and/or perform an anaesthetic within 60 minutes.</li> </ul> <p><b>Medical (Paediatrics)</b></p> <ul style="list-style-type: none"> <li>&gt; No requirement for Paediatrician</li> </ul> | <p><b>Medical</b></p> <ul style="list-style-type: none"> <li>&gt; Registered medical officers rostered and available 24 hours per day, seven days per week and able to assist with a Category 1 Caesarean section and achieve birth within 45 minutes from booking the procedure.</li> </ul> <p><b>Medical (Obstetric)</b></p> <ul style="list-style-type: none"> <li>&gt; An appointed/ nominated specialist Obstetrician who is accountable for the maternity clinical practices</li> <li>&gt; Accredited Specialist obstetrician(s) available to support the service 24 hours per day, seven days per week</li> </ul> <p><b>Medical (Anaesthetics)</b></p> <ul style="list-style-type: none"> <li>&gt; Appropriately credentialed registered medical practitioner(s) available and able to be in attendance at the health unit.</li> <li>&gt; Registered medical practitioner(s) with credentials as a specialist obstetrician or obstetric proceduralist who has formal arrangements to undertake the South Australian GP Obstetric Shared-Care Program<sup>11</sup></li> </ul> | <p><b>Medical (Obstetric)</b></p> <ul style="list-style-type: none"> <li>&gt; An appointed / nominated specialist Obstetrician as head of obstetric services</li> <li>&gt; Accredited Specialist obstetrician(s) available to support the service 24 hours per day, seven days per week</li> <li>&gt; A designated specialist obstetrician available for consultation 24 hours a day, seven days a week and able to attend a Category 1 Caesarean section and achieve birth within 30 minutes from booking the procedure</li> </ul> <p><b>Medical (Anaesthetics)</b></p> <ul style="list-style-type: none"> <li>&gt; An appointed / nominated specialist Anaesthetist as head of obstetric anaesthetic services</li> <li>&gt; Have specialist anaesthetists accredited and credentialed in the provision of obstetric anaesthesia, analgesia, including epidural analgesia in labour, and available for consultation within 30 minutes of the need and able to assist with a Category 1 Caesarean section and achieve birth within 30 minutes from booking the procedure.</li> </ul> <p><b>Medical (Paediatrics)</b></p> <ul style="list-style-type: none"> <li>&gt; An appointed / nominated specialist Paediatrician or Neonatologist as head of neonatal services</li> </ul> | <p><b>Medical (Obstetric)</b></p> <ul style="list-style-type: none"> <li>&gt; Have an appointed specialist Obstetrician as head of obstetric services</li> <li>&gt; Have accredited Specialist obstetrician(s) available to support the service 24 hours per day, seven days per week</li> <li>&gt; Have a designated specialist Obstetrician available for consultation 24 hours a day, seven days a week and able to attend a Category 1 Caesarean section and achieve birth within 30 minutes from booking the procedure</li> <li>&gt; A designated obstetric registrar on site 24 hours a day, seven days a week</li> <li>&gt; Have Maternal Fetal Medicine Specialists available for consultation 24 hours a day, seven days a week</li> </ul> <p><b>Medical (Anaesthetics)</b></p> <ul style="list-style-type: none"> <li>&gt; Have an appointed specialist Anaesthetist as head of obstetric anaesthetic services</li> <li>&gt; Have an anaesthetic registrar on site 24 hours a day, seven days a week</li> </ul> |

| Maternity & Neonatal   | Level 1 | Level 2 | Level 3   | Level 4   | Level 5  | Level 6  |
|--|---------|---------|---|---|--|--|
| <p><b>Workforce requirements</b></p> <p><i>(continued)</i></p> |         |         | <p><b>Midwifery</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; Have registered midwives rostered and available 24 hours per day, seven days per week</li> <li>&gt; Have community midwives available</li> <li>&gt; Have registered midwives rostered and available 24 hours per day, seven days per week and able to assist with a Category 1 Caesarean section</li> <li>&gt; Have access to a Lactation Consultant for advice</li> </ul> <p><b>Neonatal</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; Have registered midwives/nurses available for neonatal care in the nursery area</li> </ul> <p><b>Nursing</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; Have access to appropriately qualified operating room staff that are available 24 hours per day, seven days per week and able to assist with a Category 1 Caesarean section and achieve birth within 60 minutes from booking the procedure (these may be at an alternate appropriately staffed and resourced maternity unit within close proximity)</li> </ul> | <p><b>Medical (Paediatrics)</b></p> <ul style="list-style-type: none"> <li>&gt; An appointed/nominated specialist Paediatrician with post graduate qualifications in NICU or with neonatal/ special care experience, who is accountable for the neonatal clinical practices</li> <li>&gt; Paediatrician is available for supervision of clinical care, who is able to attend an elective caesarean section as scheduled and able to attend within 45 minutes and able to assist with a Category 1 Caesarean section and achieve birth within 45 minutes from booking the procedure</li> </ul> <p><b>Midwifery</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; The maternity /neonatal unit is managed by a registered midwife with appropriate qualifications.</li> <li>&gt; Have registered midwives rostered and available 24 hours per day, seven days per week</li> <li>&gt; Have a community midwives available</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Paediatricians/Neonatologists available, with one designated to be available for consultation 24 hours a day, seven days a week and able to attend within 30 minutes, including being able to assist with a Category 1 Caesarean section and achieve birth within 30 minutes from booking the procedure</li> <li>&gt; Appropriately accredited registered medical officers with a designated role to support the neonatal services and is available 24 hours per day, seven days per week</li> </ul> <p><b>Medical (Physician &amp; subspecialty)</b></p> <ul style="list-style-type: none"> <li>&gt; Have access to a full range of physicians, subspecialty physicians and surgeons</li> </ul> <p><b>Midwifery</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; The birth suite/birthing unit is managed by a registered midwife with appropriate post registration qualifications</li> <li>&gt; Each designated clinical area within the maternity unit is managed by a registered midwife with appropriate qualifications.</li> <li>&gt; Have registered midwives rostered and available 24 hours per day, seven days per week</li> <li>&gt; Have community midwife services available</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Have specialist anaesthetists accredited and credentialled in the provision of obstetric anaesthesia, analgesia, including epidural analgesia in labour, and available for consultation within 30 minutes of the need and able to assist with a Category 1 Caesarean section and achieve birth within 30 minutes from booking the procedure.</li> </ul> <p><b>Medical (Paediatrics)</b></p> <ul style="list-style-type: none"> <li>&gt; Have an appointed specialist Neonatologist as head of neonatal services</li> <li>&gt; Have neonatologists on staff, with one available for consultation and able to attend within 30 minutes to provide support 24 hours a day, seven days a week, including able to assist with a Category 1 Caesarean section and achieve birth within 30 minutes from booking the procedure</li> <li>&gt; Have a designated neonatal registrar/nurse practitioner available on site 24 hours a day, seven days a week</li> <li>&gt; Have a participant in the neonatal fellowship program on staff</li> </ul> <p><b>Medical (Physician &amp; subspecialty)</b></p> <ul style="list-style-type: none"> <li>&gt; Have access to full range of physicians, subspecialty physicians and surgeons</li> </ul> |

| Maternity & Neonatal                             | Level 1 | Level 2 | Level 3  | Level 4   | Level 5   | Level 6   |
|--|---------|---------|--|---|---|---|
| <p>Workforce requirements</p> <p>(continued)</p> |         |         | <p><b>Allied Health</b></p> <ul style="list-style-type: none"> <li>&gt; Limited allied health staff available and usually none designated to perinatal care but will have appropriate formal policy/protocols to guide staff, in the safe referral to specialist allied health services as required</li> </ul> <p><b>Trainees</b></p> <ul style="list-style-type: none"> <li>&gt; Health professional trainees may be on campus, providing services whilst under the supervision of their accredited registered health practitioner</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Have registered midwives rostered and available 24 hours per day, seven days per week and able to assist with a Category 1 Caesarean section and achieve birth within 45 minutes from booking the procedure</li> <li>&gt; Have access to a Lactation Consultant for advice</li> </ul> <p><b>Neonatal</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; Have access to appropriately qualified registered midwives/nurses to manage the neonatal care in the nursery area</li> </ul> <p><b>Nursing</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; Have access to appropriately qualified operating room staff that are available 24 hours per day, seven days per week and able to assist with a Category 1 Caesarean section and achieve birth within 45 minutes from booking the procedure (these may be at an alternate appropriately staffed and resourced maternity unit within close proximity)</li> </ul> <p><b>Allied Health</b></p> <ul style="list-style-type: none"> <li>&gt; Limited allied health staff available and usually none designated to perinatal care but will have appropriate formal policy/protocols to guide staff, in the safe referral to specialist allied health services as required</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Have registered midwives rostered and available 24 hours per day, seven days per week and able to assist with a Category 1 Caesarean section and achieve birth within 30 minutes from booking the procedure</li> <li>&gt; Have access to a Lactation Consultant</li> </ul> <p><b>Neonatal</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; The neonatal unit is managed by a registered nurse/midwife with appropriate post registration qualifications</li> <li>&gt; Has a designated clinical nurse/midwife educator assigned to the neonatal unit</li> </ul> <p><b>Nursing</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; Have appropriately qualified operating room staff available 24 hours per day, seven days per week and able to assist with a Category 1 Caesarean section and achieve birth within 30 minutes from booking the procedure</li> </ul> | <p><b>Midwifery</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; An appointed registered nurse as head of midwifery services</li> <li>&gt; The birth suite/birthing unit is managed by a registered midwife with appropriate post registration qualifications</li> <li>&gt; Each designated clinical area within the maternity unit is managed by a registered midwife with appropriate post registration qualifications</li> <li>&gt; Have registered midwives rostered and available 24 hours per day, seven days per week</li> <li>&gt; Have community midwife services available</li> <li>&gt; Have registered midwives rostered and available 24 hours per day, seven days per week and able to assist with a Category 1 Caesarean section and achieve birth within 30 minutes from booking the procedure</li> <li>&gt; Have access to a Lactation Consultant</li> </ul> <p><b>Neonatal</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; The neonatal unit is managed by a registered midwife/nurse with appropriate post registration qualifications</li> </ul> |

| Maternity & Neonatal                                    | Level 1 | Level 2 | Level 3 | Level 4   | Level 5  | Level 6  |
|---|---------|---------|---------|---|--|--|
| <p>Workforce requirements</p> <p><i>(continued)</i></p> |         |         |         | <p><b>Trainees</b></p> <ul style="list-style-type: none"> <li>&gt; Health professional trainees may be on campus, providing services whilst under the supervision of their accredited registered health practitioner</li> </ul> | <p><b>Allied Health</b></p> <ul style="list-style-type: none"> <li>&gt; Have allied health staff available for perinatal care</li> </ul> <p><b>Trainees</b></p> <ul style="list-style-type: none"> <li>&gt; Health professional trainees may be on campus, providing services whilst under the supervision of their accredited registered health practitioner</li> </ul> | <ul style="list-style-type: none"> <li>&gt; Have a designated registered midwife/nurse rostered each shift to attend resuscitations</li> <li>&gt; Have a neonatal nursing care outreach program</li> <li>&gt; Have registered nurse/midwife appointed as the clinical coordinator to manage the post discharge follow up of high risk neonates</li> </ul> <p><b>Nursing</b></p> <ul style="list-style-type: none"> <li>&gt; All staffing in accordance with relevant industrial instruments</li> <li>&gt; Have appropriately qualified operating room staff available 24 hours per day, seven days per week and able to assist with a Category 1 Caesarean section and achieve birth within 30 minutes from booking the procedure</li> </ul> <p><b>Allied Health</b></p> <ul style="list-style-type: none"> <li>&gt; Have a full range of allied health staff available with 'on call' arrangements for advice 24 hours per day, seven days per week (child protection, dietetics, audiology, speech therapy, occupational therapy, social work, physiotherapy, genetics)</li> </ul> <p><b>Trainees</b></p> <ul style="list-style-type: none"> <li>&gt; Health professional trainees may be on campus, providing services whilst under the supervision of their accredited registered health practitioner</li> </ul> |

| Maternity & Neonatal                         | Level 1   | Level 2          | Level 3          | Level 4          | Level 5          | Level 6  |
|--|---|------------------|------------------|------------------|------------------|--|
| Workforce requirements<br><i>(continued)</i> |   |                  |                  |                  |                  | <b>Other</b> <ul style="list-style-type: none"> <li>&gt; Have nominated staff to manage the interface between staff and equipment for neonatal intensive care</li> <li>&gt; Have nominated staff to manage and support the information management systems for the neonatal services</li> </ul> |
| Specific risk considerations                 | > As per SA Health Standards for Maternal and Neonatal Services in South Australia 2015 | > As per Level 1 | > As per Level 2 | > As per Level 3 | > As per Level 4 | > As per Level 5   |

| Support services requirements for Maternity & Neonatal services | Level 1  | Level 2        | Level 3        | Level 4  | Level 5  | Level 6        |
|---|--|----------------|----------------|--|--|----------------|
| Pathology   | Have access to limited pathology services with no 'on call' capacity for specimen analysis available | As per Level 1 | As per level 2 | Have access to limited pathology services with 'on call' arrangements 24 hours per day, seven days per week for some specimen analysis | Have a comprehensive range of pathology services with 'on call' arrangements 24 hours per day, seven days per week for specimen analysis | As per level 5 |

| Support services requirements for Maternity & Neonatal services | Level 1  | Level 2        | Level 3   | Level 4   | Level 5   | Level 6        |
|---|--|----------------|---|---|---|----------------|
| <b>Diagnostic Medical Imaging</b>                               | Have access to limited medical imaging diagnostic services with no 'on call' capacity and no local perinatal nuclear medicine services available | As per Level 1 | As per level 2  | Have no local perinatal nuclear medicine services available but have access to limited medical imaging diagnostic services with 'on call' arrangements 24 hours per day, seven days per week for some diagnostic medical imaging                                | Have 24 hours per day, seven days a week arrangements for adult and neonatal diagnostic medical imaging, including the availability of obstetric ultrasound, interventional radiology, CT and MRI with 'on call' capacity for out of hours requests   | As per level 5 |
| <b>Blood and blood products</b>                                 |  | As per Level 1 | Have Group O Negative red cells available on site, with no 'on call' capacity. These red cells are for emergency use only | Have limited blood and blood products available on site, with 'on call' arrangements 24 hours per day, seven days per week for some urgent requests   | Have comprehensive blood and blood product services available 24 hours per day, seven days a week   | As per level 5 |
| <b>Pharmacy</b>   |  | As per Level 1 | As per level 2  | Have access to limited local pharmacy services with 'on call' capacity 24 hours per day, seven days per week some for some urgent requests  | Have a comprehensive pharmacy service on site with 'on call' arrangements 24 hours per day, seven days per week   | As per level 5 |
| <b>Mental Health</b>  |  | As per Level 1 | As per level 2  | Local mental health staff available and able to provide mental health assessment, with established links with community mental health teams and will have appropriate formal policy/protocols to guide staff, in the safe management of psychiatric emergencies | Has a full range of in house mental health services, optimising the physical and mental health outcomes for the woman and her baby, with established links with community mental health teams and will have appropriate formal policy/protocols to guide staff, in the safe management of psychiatric emergencies | As per level 5 |

| Support services requirements for Maternity & Neonatal services | Level 1 | Level 2        | Level 3        | Level 4  | Level 5   | Level 6  |
|---|---------|----------------|----------------|--|---|--|
| Drug and alcohol services                                       |         | As per Level 1 | As per level 2 | As per Level 3   | Have access to a full range of drug and alcohol health services with relevant staff available 'on call' 24 hours per day, seven days per week | As per level 5   |
| Family support services   |         | As per Level 1 | As per level 2 | As per Level 3   | Have access to family support staff available 'on call' 24 hours per day, seven days per week   |  |
| Statewide Perinatal Consultant Advice                           | Nil     | Nil            | Nil            | Access to local Consultant Obstetrician(s), Neonatologist(s), Paediatrician(s) with no obligation to provide statewide support | As per Level 4  | Obstetrician and a Neonatologist, available 24 hours a day, 7 days a week on the roster to provide clinical advice to via the SA Perinatal Advice Line to support the management of the patient requiring urgent or emergency perinatal care |

| Legislation, regulations and legislative standards  | Standards, guidelines, benchmarks, policies and frameworks  |
|---|---|
| <p>In addition to those listed in the <a href="#">Fundamentals of the Framework</a>:</p> <ul style="list-style-type: none"> <li>&gt; Consent to Medical Treatment and Palliative Care Act 1995. <a href="http://www.legislation.sa.gov.au">www.legislation.sa.gov.au</a></li> <li>&gt; SA Medical Record Documentation and Data Standards (2000) <a href="http://www.legislation.sa.gov.au">www.legislation.sa.gov.au</a></li> <li>&gt; South Australian Health Care Act 2008 <a href="http://www.legislation.sa.gov.au">www.legislation.sa.gov.au</a></li> </ul> | <p>In addition to those listed in the <a href="#">Fundamentals of the Framework</a>:</p> <ul style="list-style-type: none"> <li>&gt; SA Health Policy Directives. <a href="http://www.sahealth.sa.gov.au/perinatal">www.sahealth.sa.gov.au/perinatal</a> <ul style="list-style-type: none"> <li>• Standards for the Management of Category 1 Caesarean Section in SA</li> <li>• Standards for the Management of Obese Obstetric Women in SA</li> <li>• Planned Home Birth Policy for SA</li> <li>• First Stage Labour and Water Policy in SA</li> </ul> </li> <li>&gt; SA Perinatal Practice Guidelines. <a href="http://www.sahealth.sa.gov.au/perinatal">www.sahealth.sa.gov.au/perinatal</a></li> <li>&gt; Australian College of Operating Rooms Nurse Standards. <a href="http://www.acorn.org.au">www.acorn.org.au</a></li> <li>&gt; SA Health Perinatal Emergency Education strategy <a href="http://www.sahealth.sa.gov.au/perinatal">www.sahealth.sa.gov.au/perinatal</a></li> <li>&gt; Australian College of Midwives Consultation and Referral Guidelines <a href="http://www.midwives.org.au">www.midwives.org.au</a></li> </ul> |

---

## Appendix 1 – Models of Care

Maternity and neonatal services are influenced by models of care that have been developed in response to:

- > demand from women
- > a need for a greater focus on women-centred care
- > primary health care principles and community based approaches
- > a strengthening of the interface between hospital care and community based care.

The most significant change in care for pregnant women over the past few years is the recognition of the benefits of the continuity of a known care provider throughout the continuum of care for the perinatal period. It is acknowledged that pregnancy care provided within a continuum of care model will enhance maternal satisfaction and better health outcomes for the woman and her baby.

Health units at all levels involved in maternity services should consider offering a range of models depending on demand, staff and facilities available, recognising that midwives are the most appropriate carers for women with a normal health pregnancy and acknowledging that women with an increased risk will need specialist obstetric care.

### Description of some maternity models of care

#### Midwifery led care model

The midwifery led model of care was developed as a continuum of care with arrangements for consultation and referral to registered medical officers and midwives as indicated. It has been established as a model that enhances midwifery practice and provides safe maternal care with medical support at hand; if required. It involves a small team of midwives attending to the antenatal, intrapartum and postnatal care of the pregnant woman who meets a predetermined risk criterion. Midwives attend to the majority of the antenatal/postnatal care in a roster/on-call arrangement, and may involve the client's registered medical officer.

#### GP obstetric shared-care model

The General Practitioner (GP) obstetric shared-care model is based on the philosophy that a GP is integral to family health needs.

Women wishing to attend a South Australian public hospital for childbirth have the option of GP obstetric shared care if they meet a predetermined risk criterion. In this model, the GP, who has undertaken extra training to become accredited shared-care provider, manages most of the antenatal and postnatal care, while the public hospital staff provides the inpatient and some outpatient obstetric care. This model is supported by the South Australian GP Shared Obstetric Care Protocols<sup>11</sup>, developed within a statewide collegial framework. This model allows easy access to a range of supportive health care staff and services available in public hospitals

#### Private funded model

As a predominantly medical model of care; a pregnant woman can access private funded perinatal care with their preferred obstetrician and access a privately funded maternity unit for components of the perinatal care.

In some country areas of South Australia, the model is slightly altered with a mix of public and private care. In this situation, the local registered medical officer and/or obstetrician offer private funded antenatal care and continue to support the woman through her birth in the local public hospital as a public patient.

---

### **Privately Practising Eligible Midwives model**

Women can access a privately-practising registered eligible midwife who commonly provides the required perinatal care in the woman's home. There is also a national framework supporting the privately practicing registered eligible midwife to assist women wishing to have a planned homebirth<sup>9</sup>.

As part of the national maternity services reform 2013, privately practicing eligible midwives can provide care for women in a public maternity unit upon securing clinical privileging, admitting and practice rights in addition to a collaborative arrangement with an obstetric consultant.

### **Caseload midwifery model**

A caseload model of midwifery care is essentially where a midwife co-ordinates the care of a woman through the continuum of pregnancy, labour, birth and the postnatal period. The principle that guides this model of care is that each woman will have 'known' midwives whom she meets regularly during her pregnancy. The care can be provided in the community, the woman's home or in hospital.

The midwife consults with registered medical officers, allied health staff or other health professionals, if required, and as indicated by the woman's condition will refer the woman to other health professional staff. Midwifery Group Practice is the name given to a number of caseload models of midwifery care around the world and in Australia. The Nursing & Midwifery SA Public Sector Enterprise Agreement includes specific requirements for midwifery group practice.

### **Aboriginal family birthing programs**

Aboriginal family birthing programs employ Aboriginal Maternal and Infant Care (AMIC) workers; ie Aboriginal women who have undertaken or working towards a Certificate IV in Aboriginal and / or Torres Strait Islander Health Care Training /Practice. The AMIC worker works in collaboration with registered midwives and registered medical officers in intellectual and inter-cultural partnerships that aim to provide culturally focussed perinatal care the antenatal, birthing and postnatal periods for the Aboriginal woman and their families. A key quality of the program is the collegial relationship established between the AMIC worker, which nurtures trust and rapport within the team, and subsequently reflects in the woman's confidence and thus improves her willingness to access health services

### **Medical model**

A model whereby antenatal care is provided at a maternity hospital as outpatient appointments and the woman is usually supported at that same hospital, for her labour and birth. Postnatal care is then co-ordinated by that hospital in liaison with domiciliary midwifery services for postnatal care following discharge from hospital.

The woman may not have the same doctor or midwife throughout the pregnancy and those caring for her during the antenatal period may not be involved with her labour, birth or postnatal period. Usually there are different medical and midwifery staff in the different sections of the hospital who provide care for different aspects of the woman's maternity experience.

---

## Reference List

1. Department of Health 2012, 'Maternal, Perinatal and Infant Mortality in South Australia 2010'
2. Department of Health, National Maternity Services Capability Framework 2012, sited [www.health.gov.au](http://www.health.gov.au)
3. Department of Health, National Maternity Services Plan 2010; sited [www.health.gov.au](http://www.health.gov.au)
4. NSW Health Guide to the role delineation of Health Services 3rd Edition 2020; sited [www.health.nsw.gov.au/services/Publications/guide-role-delineation-health-services](http://www.health.nsw.gov.au/services/Publications/guide-role-delineation-health-services)
5. South Australian Department for Health and Aging, 2012, South Australia's Health Care Plan 2007-2016
6. South Australian Department for Health and Ageing 2013, South Australian Perinatal Practice Guidelines, available via iTunes APP store, called: Practices Guideline Reader or the website. [www.health.sa.gov.au/ppg](http://www.health.sa.gov.au/ppg)
7. South Australian Department of Health Standards for the Management of Category 1 Caesarean Section in SA, South Australian Department for Health and Aging, December 2011, [www.sahealth.sa.gov.au](http://www.sahealth.sa.gov.au)
8. Standards for the Management of the Obese Obstetric Woman in SA, South Australian Department for Health and Aging, May 2012, [www.sahealth.sa.gov.au](http://www.sahealth.sa.gov.au)
9. Planned Home Birth Policy for SA; South Australian Department for Health and Aging, May 2014, [www.sahealth.sa.gov.au](http://www.sahealth.sa.gov.au)
10. First Stage Labour and Birth in Water Policy in SA, South Australian Department for Health and Aging, February 2011, [www.sahealth.sa.gov.au](http://www.sahealth.sa.gov.au)
11. SA GP Shared Care Protocols; A statewide model; South Australian Department for Health and Ageing, [www.sahealth.sa.gov.au](http://www.sahealth.sa.gov.au)
12. Nursing Midwifery Enterprise Agreement: [www.nursingsa.com/pdf/Nursing/Nursing\\_Midwifery\\_Enterprise\\_Agreement\\_2010.pdf](http://www.nursingsa.com/pdf/Nursing/Nursing_Midwifery_Enterprise_Agreement_2010.pdf) as sited October 23 2012
13. ANMAC – National Competency Standards for the Midwife, January 2006, sited [www.nursingmidwiferyboardmidwives.gov.au](http://www.nursingmidwiferyboardmidwives.gov.au)
14. SA Medical Record Documentation and Data Capture Standards (2000);sited [www.sahealth.sa.gov.au](http://www.sahealth.sa.gov.au)
15. ACORN standards for perioperative nursing 2014-2015. Australian College of Operating Room Nurses Ltd, sited [www.acron.org.au](http://www.acron.org.au)
16. Australasian Health Facility Guidelines, Australasian Health Infrastructure Alliance, Revision 5.0, 24 February 2014
17. RANZOG (2014) Intrapartum Fetal Surveillance Clinical Guidelines 3rd Edition [www.ranzcog.edu.au/](http://www.ranzcog.edu.au/)
18. South Australian Department of Health, March 2005, South Australian Women's Health Policy, Adelaide

---

## For more information

**SA Health**  
**Telephone: 08 8226 6891**  
**[www.sahealth.sa.gov.au/CSCF](http://www.sahealth.sa.gov.au/CSCF)**

Public I1-1A

© Department for Health and Ageing, Government of South Australia. All rights reserved. FIS: 15137.2-16 August 2016.



[www.ausgoal.gov.au/creative-commons](http://www.ausgoal.gov.au/creative-commons)



**Government  
of South Australia**

SA Health