



Maternity and Newborn Care Guidelines - Endorsed for Use in Clinical Practice Policy

1. Background

External resources that are endorsed for use in WACHS clinical practice provide a:

- standard for clinical governance and service delivery,
- a range of information and evidence-based practice
- support best practice by all staff for patients and clients.

When applied, the information contained in these guidelines must take account of the context and scope of practice, level of service delivery and facility capacity.

These guidelines do not indicate an exclusive course of action and variations must take into account individual circumstances, clinical judgement, scope of professional practice and patient choice, and may be appropriate dependent on the health care setting. The rationale for any variation to the guidelines must be clearly documented in the individual patient record by the treating practitioner.

While every reasonable effort is made to ensure the accuracy of the information contained in these guidelines, no guarantee can be given that the information is free from error or omission. Users are strongly recommended to independently confirm that the information contained within these guidelines and procedures is current, especially drug doses that may change from time of publication.

Please note the web-based electronic copy is the master copy for all guidelines, policies and procedures.

2. Policy Statement

WA health system policy documents are the overarching policy documents that must be complied with by all employees (including casual, locum, agency and credentialed visiting practitioners). WACHS supplements these with its own policy suite and also endorses a number of evidence based guidelines and resources from other WA Health Service Providers and organisations, external to the WA health, for use in clinical practice.

WA health system and WACHS specific policy / medical records, including those for Obstetric, Midwifery and Newborn care, are available via the [HealthPoint Policies](#) intranet site.

2.1 WACHS endorses the following maternity and newborn clinical policies / guidelines for use by Medical, Midwifery, Nursing, Mental Health and Allied Health staff:

- **Women and Newborn Health Service - King Edward Memorial Hospital (KEMH) clinical guidelines:** [WNHS-Clinical Policy-Guidelines-Landing page](#)

Links to frequently used KEMH Obstetrics and Gynaecology clinical guidelines can also be found here [WACHS Intranet: Obstetrics and Gynaecology](#)

- **The Australian College of Midwives**
[National Midwifery Guidelines for Consultation and Referral \(3rd Ed Issue 2\)](#)
- **The Royal Australian and New Zealand College of Obstetricians and Gynaecologist (RANZCOG)**
[Maternal suitability for models of care \(C-Obs-30\)](#)
- **The Newborn Emergency Transport Service WA (NETS)**
[NETS Medical Guidelines](#)
- **The Royal Flying Doctor Service (RFDS)**
[RFDS clinical-manuals-wa](#)
- **Commonwealth Department of Health**
[Australian National Breastfeeding Strategy](#)
[Commonwealth Fetal Alcohol Spectrum Disorders Action Plan](#)
[The Australian Immunisation Handbook](#)

3. Standards

[National Safety and Quality Healthcare Standards](#) (First edition 2012) – 1.1.1, 1.3.1-3, 1.7.1 - 2

[National Safety and Quality Healthcare Standards](#) (Second edition 2017) - 1.15a-c, 1.16 a 7 b, 1.27 a & B, 5.4 a – c, 5.5a, 5.6, 5.7a & b, 5.13 a f, 6.9 a & B, 6.11 a-c.

4. Compliance

Failure to comply with this policy may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Employment Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (HSA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

Staff are reminded that compliance with all policies is mandatory.

5. Roles and Responsibilities

5.1 Executive Directors of Medical, Nursing and Midwifery Services are responsible for:

- acting as the principal endorsement authority for external organisations' clinical policy documents.

5.2 Area and Regional Medical, Nursing Directors are responsible for:

- participating in the review for appropriateness of external organisations' clinical policy and guideline documents for use by clinicians within the WACHS.

5.3 All clinicians are accountable for their own practice and are to provide care:

- within their registration status
- in accordance with the codes and guidelines approved by their relevant National Board supported by AHPRA
- within their scope of practice and competence
- within their prescribed responsibilities and duties as defined in their Job Description Form (JDF) and
- within the context of practice that they are operating.

6. Evaluation

The number of reportable clinical incidents or near misses relating to inappropriate care provided by clinicians.

7. References

Nursing and Midwifery Board of Australia, [Decision making framework for Nurses \(2013\)](#) and [Decision making framework for Midwives \(2010\)](#)

8. Policy Framework

[Clinical Governance, Safety and Quality Policy Framework](#)

**This document can be made available in alternative formats
on request for a person with a disability**

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