



Special Referrals to Child Health Services Policy

1. Background

WA Country Health Service (WACHS) is committed to ensuring the seamless transition of care between maternity and child health services. Good communication and continuity of care is important across the neonatal period to optimise the health and development of infants by providing quality and timely support to new parents.

Care transition and continuity is important for all infants and new parents, as recognised in statutory law in Western Australia which requires midwives to furnish the Maternal and Child Health Unit with a report of every case (birth) attended, in writing, within 48 hours of a birth. In turn, community child health staff organise home visits within 14 days of birth to commence services that focus on responsive parenting for optimal child development and wellbeing, and early identification of health developmental concerns.

It is critical that the most vulnerable children are identified and referred to child health services as early as possible to be prioritised for care and support. Special Referrals from maternity services to child health services are initiated for this purpose. Special Referrals may be initiated at any time prior to discharge from hospital, in the antenatal or postnatal period when infant or family risk factors are identified.

2. Policy Statement

This policy defines the roles and responsibilities of staff working across maternity, neonatal and child health services in relation to Special Referrals to Child Health Services (Special Referrals), to facilitate timely and effective transfer of information for families with known risk factors for the newborn or family.

3. Procedures

3.1 Maternity Service Staff

- Midwives enter birth data into the perinatal database within 48 hours of the birth **for all births**
- Maternity service staff identify newborns at risk and who require a Special Referral. See [Appendix 1](#) for the list of indicators.
- Maternity staff initiate Special Referrals via the perinatal database **or** using the [Special Referral to Child Health Services Form](#) (to be faxed directly to 9223 8598).
- Refer to [WACHS postcodes list](#) to match postcodes to regions.

3.2 Central Population Health Office (Central Office)

- Special Referrals for any newborn being discharged to a WACHS region are received by Central Office into a generic email account
- Central Office staff check the email account at least once per day and distribute the Special Referrals to the Regional Designated Officer via the nominated regional email addresses

3.3 Regional Population Health Directorates

- Each WACHS Regional Population Health Directorate will nominate a Regional Designated Officer (RDO) to undertake the role of allocating and monitoring Special Referrals for the local child health service
- Special Referrals are emailed directly to RDOs in each region
- RDOs check the email account at least once per day for Special Referrals and promptly distribute forms:
 - Via email (with a read receipt) to appropriate child health nurse/child health clinic
- or**
 - Placed in local shared folder according to clinic location or similar in Community Health Information System (CHIS)
- Child health nurses assess the Special Referral and prioritise client for contact.
- The Special Referral is attached to the child health electronic clinical record i.e. CHIS
- Services are initiated and provided as required by the family to optimise child health, development and wellbeing

4. Definitions

Notification of Case Attended form	It is a requirement under the Section 335 of the <i>Health (Miscellaneous Provisions) Act 1911</i> that the midwife in attendance at any birth complete a 'Notification of Case Attended' form. ^a
Birth Notification	This information is derived from the Notification of Case Attended form and may be presented electronically or scanned as an attachment. It is stipulated in the <i>WA Health Act</i> that this must be forwarded to Department of Health Maternal and Child Health Unit within 48 hours of the birth ^a
Perinatal database	Databases which collect perinatal data and enables submission of some of this data electronically as Notifications of Case Attended. ^b
Special Referral to Child Health Services Form	Form used to signal and prioritise families and infants with risk factors identified in the antenatal or postnatal period.

5. Roles and Responsibilities

Midwives are responsible for:

- submitting birth notifications to the Maternal and Child Health Unit, (Department of Health) for all births via the STORK Perinatal Database within 48 hours of the birth
- identifying infant and family vulnerability, and making Special Referrals so the family can be prioritised for child health services following discharge from hospital.

Maternal and Child Health Unit (Department of Health) is responsible for:

- collecting all birth notifications (public and private maternity services), and forwarding to child health services to initiate a service response for each infant
- monitoring and reporting on birth notifications for Western Australia.

WACHS Population Health Central Office is responsible for:

- receiving and distributing Special Referrals from maternity services
- daily checking for Special Referrals and timely on-sending to Regional Designated Officers.

Regional Population Health Directorates are responsible for:

- appointing a Regional Designated Officer (RDO), managers and child health nurses to delivery of timely and effective child health services.

Child Health Services are responsible for:

- timely and coordinated service responses for each birth notification
- prioritised service response upon receipt of a Special Referral.

6. 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.

WACHS staff are reminded that compliance with all policies is mandatory.

Submission of birth notifications is a mandatory requirement under Section 335 of the [Health \(Miscellaneous Provisions\) Act 1911](#)

7. Records Management

Birth notifications

The Midwifery Notification System provides a daily extract of WACHS birth notifications which the Community Health Information System (CHIS) automatically processes. The birth notification process is then followed by the clinicians to ensure provision of services in line with WACHS policies.

Special Child Health Referrals

Special child health referral are completed by maternity services staff and received either by fax or email to WACHS Population Health Central Office. The referrals are managed and distributed to Regional Designated Officers.

Upon receipt by the child health nurse, Special Child Health Referrals are reviewed and retained as attachments to the child health record as per current CHIS processes and guidelines.

For further information about the management, storage and retention of records, refer to the [Health Record Management Policy](#)

8. Evaluation

From July 1, 2019 monitoring of compliance with this document is to be carried out by Area Director, Population Health quarterly by analysing data for provision of 0-14 days first contact for clients subject to a Special Referral for Child Health Services.

9. Standards

[National Safety and Quality Health Service Standards](#) (Second edition 2017) - 1.28

10. Legislation

Section 335 of the [Health \(Miscellaneous Provisions\) Act 1911](#) (Part XIII).

11. Related Forms

[Special Referral to Child Health Services Form](#)

12. Related Policy Documents

[Child Health Services Policy](#) Child and Adolescent Health Service

[WACHS Healthy Country Kids Program: an integrated child health and development service strategy 2016-2019](#)

13. Related WA Health System Policies

[OD0606/15 Guidelines for Protecting Children 2015](#)

14. Policy Framework

[Information Management Policy Framework](#)

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

15. Appendix

Appendix 1: [Indicators for Special Referral to Child Health Services](#)

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on request for a person with a disability**

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Appendix 1: Indicators for Special Referral to Child Health Services

Parent factors

- Alcohol and/or drug abuse
- Anxiety, depression or other mental illness
- Foster care or adoption
- Child Protection involvement
- Family instability, conflict or violence
- Rejection of baby or poor attachment
- Unsupported teenage parent
- Lack of support at home and/or social isolation
- Homelessness
- Intellectual disability

Infant factors

- Low birth weight
- Multiple birth
- Physical issues post birth, trauma, health conditions
- Prematurity
- Weight loss >10% of birth weight
- Stillbirth or neonatal death
- Difficulties with feeding
- Disability
- Transfer to special care nursery

Home and community environment

- Exposure to smoking
- Housing in disrepair and unsafe
- Overcrowded housing
- Poor sanitation and/or lack of fresh water.
- Poor access to healthy food
- Poor access to transport
- Remote community