

CIRCULAR

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NSW Midwives Data Collection Form MR44/PR16: routine forwarding of green copy by maternity unit to community health – early childhood health services

Ensuring continuity of care between maternity services and community health - early childhood health services is important in improving health outcomes for children and providing support to parents.

The Midwives Data Collection Form MR44/PR16 (1/98) contains a green copy for forwarding to the local early childhood health centre. The routine forwarding of the green copy of the MR44 is an important and essential safety net component in ensuring continuity of care between hospital maternity services and community health – early childhood health services.

This receipt of the Midwives Data Collection Form alerts the early childhood health service to the birth of a baby in the local area. If the family has not attended the early childhood health centre within a reasonable period of time contact can be made with the family by the early childhood health service.

Advice regarding the provision of this information to the early childhood health service should be provided to parents as part of the routine information provided by the hospital on booking in.

Maternity unit staff are to ensure that the green copy of the Midwives Data Collection Form MR44/PR16 is completed for all neonates prior to discharge from hospital and routinely forwarded to the nominated local early childhood health centre or community health centre, as required by individual Area Health Services.

For those hospitals with computerised obstetric information systems an appropriate print out that includes the information on the green copy of the MR44/PR16 should be provided and forwarded to the nominated local early childhood health centre or community health centre.

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In addition, local strategies directed at improving liaison are also important. Area Health Services are encouraged to explore additional strategies to facilitate stronger links between maternity services and early childhood health services, other community health services and general practitioners. Such strategies may include: regular liaison between maternity staff and early childhood health staff; introduction of early childhood health services and staff to families antenatally; on discharge assessment, identification of potential risk factors to ensure appropriate referral, follow up and provision of service following birth.

Michael Reid
Director-General