

# Maternity and Maternal Child Health Services communication matrix

Stages	All mothers and babies		Vulnerable families with medical and/or psycho-social risk issues		Stillbirth/ neonatal death	
	Communication methods	Information provided to MCHN	Additional communication methods	Additional information provided to MCHN	Communication	Information provided to MCHN
Ante natal	<b>MCH information: brochure, video, speaker</b>  Maternity staff provides to parents		<b>Maternity staff phone MCHN prior to birth</b>  <b>Maternity staff inform parents of address and phone number of their MCH Centre</b>	1. Date/time of contact 2. Medical and psycho-social issues 3. Expected date of delivery 4. Family support 5. Hospital contact 6. Other agencies involved 7. Interpreter/language		
Post natal day 1	<b>Birth Notice</b> Clearly printed on A4 paper  Hospital staff fax, or email  Then post hard copy to designated LGA address  Hospital has directory of municipalities	1. Mother's family name, then first name 2. Mother's address and telephone number at discharge 3. Date and time of birth 4. Alive or stillborn 5. Gender of baby 6. Full term or premature 7. Accoucheur 8. Signature or address of notifier 9. Hospital unit and contact number 10. Any request for MCHN to contact hospital 11. Interpreter/language	<b>MCHN phones hospital unit</b> (as requested on Birth Notice)	1. Date/time of contact 2. Medical and psycho-social issues for mother and baby 3. Any additional hospital contact details 4. Address at discharge 5. Other agencies involved 6. Child Protection involvement 7. Case conference details 8. Discharge planning and agreed MCHN role	<b>Hospital staff phones MCHN prior to sending Birth Notice if possible</b>	1. Date/time of contact 2. Parity 3. Gestation 4. Birth details 5. If termination, reason 6. Maternal health issues 7. Interpreter and language 8. Social worker or other service contact details
Prior to going home	<b>Child Health Record (CHR)</b> <b>Discharge summary</b> <b>Perinatal data sheet</b>  Maternity staff provides to mother. Mother provides to MCHN at home visit	1. Full name 2. If discharged to another address 3. Gestation 4. Birth weight 5. Discharge weight 6. Birth details 7. Newborn examination 8. Vitamin K 9. Hepatitis immunisation 10. Details re any jaundice 11. Hearing risk factors 12. Feeding and settling 13. Breast feeding history and plan 14. Developmental abnormality 15. Other information re baby's health 16. Maternal health 17. Post partum haemorrhage 18. If Anti D given 19. Family support 20. SIDS risk factors	<b>Maternity staff phones MCHN</b>  MCHN telephone message states centre name and when attended  Maternity Services has MCH Centre Directory	1. Date/time of contact 2. Medical and/or psychosocial issues 3. Anticipated discharge date 4. Confirm discharge address and phone number 5. Discharge plan and agreed role of MCHN 6. Domiciliary service contact details and date of first visit 7. Other agencies involved 8. Case Conference details 9. Contact details of hospital unit and caller		
			<b>Written referral</b>  Maternity staff complete for MCHN	1. As per above phone information. Format according to local agreement		
			<b>Case conference meeting</b>  Maternity staff arranges meeting	1. Meeting date, time and venue 2. Case manager contact details 3. Participants		
Neonatal Unit/ Special Care Unit			<b>Newborn services discharge information sheet</b>  Maternity staff completes for mother to show to MCHN	1. Date/time of contact 2. Birth details 3. Medical and psycho-social issues 4. Doctors names 5. Medication at discharge 6. Nutrition and feeding 7. Follow up services, appointments and dates		
			<b>Maternity staff phones MCHN</b>  MCHN telephone message states centre name and when attended  Hospital has MCH centre directory	1. Information as per discharge sheet 2. Any specific medical and psycho-social issues 3. Domiciliary services contact details and date of first visit 4. Discharge plan and agreed MCH role 5. Contact details of hospital unit and caller		
Domiciliary service: 1st home visit	<b>Dom midwife telephones MCHN</b>	1. Medical or psycho-social issues for mother and baby 2. Nutrition and feeding 3. Nursing plan including agreement re when MCH and domiciliary service will visit 4. Other relevant information 5. Name and contact number of caller	<b>Dom midwife phones MCHN</b>	1. Date/time of contact 2. Medical and psycho-social issues 3. Nutrition and feeding 4. Plan of coordinated MCHN and domiciliary visits 5. Any relevant additional information 6. Other agencies involved		
At discharge	<b>Notes in CHR</b>  Dom midwife enters information into CHR	1. Medical or psycho-social issues for mother and baby 2. Nutrition and feeding 3. Discharge plan	<b>Dom midwife phones MCHN</b>	1. Date/time of contact 2. Medical and psycho-social issues 3. Any relevant additional information 4. Other agencies involved 5. Discharge plan and agreed MCHN role		
Post - discharge			<b>MCHN phones hospital</b>	1. Date/time of contact 2. Client details 3. Reason for contact and presenting issues 4. Agreement re action for client		

