1. **Purpose**
   
   The purpose of the *Cardiotocography Monitoring Policy* (this Policy) is to mandate minimum requirements for cardiotocography (CTG) monitoring practices and staff education for providers of publicly-funded maternity services.

   The primary purpose of CTG monitoring is to help identify signs of suspected fetal compromise in order to initiate management that may reduce or prevent fetal morbidity and mortality. This Policy aims to improve perinatal outcomes and reduce the risk of adverse events associated with CTG monitoring clinical practices within Health Service Providers that provide maternity services.

   This Policy is a mandatory requirement under the *Clinical Governance, Safety and Quality Policy Framework* pursuant to section 26(2)(c) of the *Health Services Act 2016*.

2. **Applicability**

   This Policy is applicable to Health Service Providers that provide maternity services and Contracted Health Entities to the extent that this Policy forms part of the contract.

3. **Policy requirements**

   **A. Education**

   Health Service Providers and Contracted Health Entities must develop a set of minimum mandatory CTG monitoring education requirements which align to section 3 of the *Cardiotocography Monitoring Standard*.

   **B. CTG Monitoring**

   Health Service Providers and Contracted Health Entities must adopt:

   - minimum mandatory CTG monitoring standards as outlined in sections 4.1 – 4.3 of the *Cardiotocography Monitoring Standard*.

   - a standardised approach to documentation, terminology for reporting of CTG recordings consistent with the minimum mandatory CTG recording and reporting standards as found in section 4.4 of the *Cardiotocography Monitoring Standard*.

   **C. Clinical care escalation**

   Health Service Providers and Contracted Health Entities must adopt CTG care management escalation requirements as found in section 4.5 and Appendix A of the *Cardiotocography Monitoring Standard*.

   **D. Clinical Audit**

   Health Service Providers must:
• regularly audit their clinical practice and the education compliance of their staff as outlined in section 5 of the State-wide Cardiotocography Monitoring Standard.

• audit their compliance with this Policy within 12 months of implementation using the audit tool provided in Appendix C of the Cardiotocography Monitoring Standards, and provide results of the audit to the System Manager via safetyandquality@health.wa.gov.au within one month of the audit.

4. Compliance, monitoring and evaluation

Health Service Providers are responsible for complying with this Policy. Health Service Providers must audit their compliance with this Policy within 12 months of implementation using the audit tool provided in Appendix C of the Cardiotocography Monitoring Standards, and provide results of this audit to the System Manager via safetyandquality@health.wa.gov.au within one month of audit.

The System Manager will monitor Health Service Provider compliance with, and evaluate the effectiveness of, this Policy on a regular basis using any and all routine data sources already available to the System Manager, in addition to the Health Service Provider’s clinical audit results, and education database reports required by this policy. In addition to these routine data sources, the System Manager may request that Health Service Providers provide the System Manager with additional clinical and compliance audit data in relation to the requirements of this Policy, if deemed necessary.

5. Related documents

The following documents are required to give affect to this Policy (i.e. the documents included are mandatory):

• Cardiotocography Monitoring Mandatory Standard

6. Supporting information

The following documents inform this policy (i.e. documents that are not mandatory to the implementation of this policy but may support the implementation of the policy):

• SOSU Education Hub:
  Intrapartum Fetal Surveillance Guideline Third Edition 2014. RANZCOG

7. Definitions

The following definitions are relevant to this policy.

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tr>
<td>CTG monitoring</td>
<td>Monitoring and assessment of fetal heart rate and uterine</td>
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</table>
activity using cardiotocography. Can be conducted in the antepartum and intrapartum periods.

| Maternity services | Specialised services that include the assessment and treatment of women and babies during pregnancy, labour, birth and the postnatal period. |

### 8. Policy owner

**Assistant Director General, Clinical Excellence Division**

Enquiries relating to this Policy may be directed to:

Title: Executive Director, Patient Safety and Clinical Quality

Division: Clinical Excellence

Email: safetyandquality@health.wa.gov.au

### 9. Review

This mandatory policy will be reviewed and evaluated as required to ensure relevance and recency. At a minimum it will be reviewed within 1 year after first issue and at least every 3 years thereafter.

<table>
<thead>
<tr>
<th>Version</th>
<th>Effective from</th>
<th>Effective to</th>
<th>Amendment(s)</th>
</tr>
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<tbody>
<tr>
<td>MP0076/18</td>
<td>10 January 2018</td>
<td>10 January 2022</td>
<td>Original version</td>
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### 10. Approval

This mandatory policy has been approved and issued by the Director General of the Department of Health.

<table>
<thead>
<tr>
<th>Approval by</th>
<th>Dr David Russell-Weisz, Director General, Department of Health</th>
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<tbody>
<tr>
<td>Approval date</td>
<td>20 December 2017</td>
</tr>
<tr>
<td>Published date</td>
<td>10 January 2018</td>
</tr>
<tr>
<td>RMR#</td>
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