**Perinatal Data Collection**

NSW Ministry of Health

# Background

The NSW Perinatal Data Collection (formerly known as the Midwives Data Collection) is a population-based surveillance system covering all births in NSW public and private hospitals, as well as homebirths. The data collection has operated since 1987 but only continuously since 1990. The Perinatal Data Collection (PDC) is a statutory data collection under the NSW Public Health Act 2010.

The PDC encompasses all live births, and stillbirths of at least 20 weeks gestation or at least

400 grams birth weight. For every birth in NSW the attending midwife or medical practitioner completes a form (or its electronic equivalent) giving demographic, medical and obstetric information on the mother, and information on the labour, delivery and condition of the infant. Completed forms are sent to the Data Integrity and Governance Unit, Information Management and Quality, in the Health System Information and Performance Reporting Branch of the NSW Ministry of Health, where they are compiled into the PDC database. Around two-thirds of PDC notifications are received electronically from hospital obstetric information systems. There are several electronic systems that generate the PDC data including ObstetriX and Cerner.

The information sent to the NSW Ministry of Health is checked and compiled into one statewide dataset. One record is reported for each baby, even in the case of a multiple birth. The PDC was revised in 1998, 2006 and 2011. The PDC includes notifications of births which occur in NSW which includes women whose usual place of residence is outside NSW and who give birth in NSW; it does not receive notifications of interstate births where the mother is resident in NSW. The collection is based on the date of birth of the baby.

# Access to information on Aboriginal and Torres Strait Islander peoples

An application to the Aboriginal Health and Medical Research Council (AH&MRC) ethics committee should be made for research projects for which one or more of the following apply:

* The experience of Aboriginal people is an explicit focus of all or part of the research
* Data collection is explicitly directed at Aboriginal peoples
* Aboriginal peoples, as a group, are to be examined in the results
* The information has an impact on one or more Aboriginal communities
* Aboriginal health funds are a source of funding

Research that is not specifically directed at Aboriginal people or communities, such as for the total population or a sub-population (e.g. rural NSW, people over 50 years old) can still potentially impact on Aboriginal people.

However, an application for such research need only be made to the Committee if *any* one of the following applies:

* Any of the five factors listed above are present; or
* Aboriginal people are known, or are likely, to be significantly over-represented in the group being studied (e.g. compared to the 2.1% of the total NSW population as shown in the 2006 Census); or
* The Aboriginal experience of the medical condition being studied is known, or is likely, to be different from the overall population; or
* There are Aboriginal people who use the services being studied in distinctive ways, or who have distinctive barriers that limit their access to the services; or
* It is proposed to separately identify data relating to Aboriginal people in the results.

The AH&MRC ethics committee have some specific requirements, including evidence of community engagement in the research. Relevant documents can be found on the AH&MRC website at: <http://www.ahmrc.org.au>. If you are unsure whether an application to the AH&MRC Ethics Committee is required, please seek the advice of the Ethics Committee secretariat (T: 02 9212 4777).

# Tips for using the PDC in linkage studies

* While the PDC has operated continuously since 1990, personal identifiers were only included in the data collection after 1992, when it became a statutory data collection under the NSW Public Health Act 1991. There was also a revision to the PDC form in 1993, which was implemented gradually. Consequently, personal identifiers and a number of other fields are available for approximately half of the 1993 records. For these reasons it is recommended that record linkage studies be carried out using data collected from 1994.
* The PDC record contains information on mothers and babies. As the CHeReL links records for the same person (rather than across generations), two sets of personal identifiers from the PDC records are provided to the CHeReL—one for mothers and one for babies. These are known as the PDC mother and PDC baby datasets. When using the PDC in linkage studies, please consider whether mothers or babies or both are of interest. If both mothers and babies are of interest, the CHeReL will create a PDC mother linkage key and a PDC baby linkage key. The data custodian will add both mother and baby project person numbers (PPNs) to the PDC dataset for provision to the project investigators.

# Data custodians

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# Perinatal Data Collection – Variable information

| Variable | Description/Notes | Codes |
| --- | --- | --- |
| Mother’s date of birth | Full date of birth will only be supplied if sufficient justification is supplied that age is insufficient. Date of birth may otherwise be supplied as MMYYYY. |  |
| Mother’s age | Age in years |  |
| Mother’s country of birth | The country in which the mother was born | Codes are the Australian Bureau of Statistics 4 digit country of birth names [http://www.abs.gov.au/ausstats/abs@.nsf/mf/1269.0](http://www.abs.gov.au/ausstats/abs%40.nsf/mf/1269.0) |
| Mother’s Aboriginality | Used for trends from 1994 to present. See notes above regarding access to this variable. | 1 = Aboriginal or TSI2 = Non-Aboriginal9 = Not stated |
| Mother’s Indigenous status | Mother’s Indigenous status. Used from 1998 onwards. See notes above regarding access to this variable. | 1 = Aboriginal2 = Torres Strait Islander3 = Aboriginal and Torres Strait Islander4 = None of the above9 = Not stated |
| Mother’s marital status | Available for 1994-1997 | 1 = Married (inc. de facto)2 = Never married3 = Divorced, separated or married9 = Not stated\*\*OTHER\*\* = Invalid data |
| Hospital of birth | Hospital of birth for live births and stillbirths.  | Code lists are updated regularly. If information on specific facilities is required, these should be specified by name. |
| Health Area of hospital | Health Area of hospital. Not available from 2011 onwards | See Attachment 1 – Area Health Services |
| Local Health District of hospital | Local Health District of hospital | See Attachment 2 – Local Health Districts |
| Mother’s postcode | Mother’s postcode of residence |  |
| Mother’s SLA of residence | SLA of residence | Codes are according to the Australian Standard Geographical Classification (ASGC) issued by the Australian Bureau of Statistics [http://www.abs.gov.au/ausstats/abs@.nsf/mf/1216.0](http://www.abs.gov.au/ausstats/abs%40.nsf/mf/1216.0) |
| Health Area of residence | Health Area of residence (2006). Not available from 2011 onwards | See Attachment 1 – Area Health Services |
| Local Health District of residence | Local Health District of residence  | See Attachment 2 – Local Health Districts |
| Hospital Insurance status | Available for 1994-1997 | 1 = Yes (Private)2 = No (Public)9 = Not stated |
| Baby’s date of birth | Full date of birth will only be supplied if sufficient justification is supplied that age is insufficient. Date of birth may otherwise be supplied as MMYYYY. |  |
| Date of LMP | Date of last menstrual period. Available for 1994-2006. Full date will only be supplied if sufficient justification is supplied that gestational age is insufficient. |  |
| EDC | Expected date of confinement. Available for 2006 onwards. Full date will only be supplied if sufficient justification is supplied that gestational age is insufficient. |  |
| Previous pregnancy >20 weeks gestation? | Previous pregnancy greater than 20 weeks gestation | 0 = No1 = Yes9 = Not stated |
| Number of previous pregnancies | Number of previous pregnancies greater than 20 weeks gestation |  |
| Was last birth by caesarean section? | Available from 1998 onwards | 0 = No1 = Yes9 = Not stated |
| Total number of previous caesarean section | Available from 1998 onwards |  |
| Amniocentesis (<20 weeks) | Available for 1994-1997 | 0 = No1 = Yes9 = Not stated |
| CVS (<20 weeks) | Chorionic villus sampling. Available for 1994-1997 | 0 = No1 = Yes9 = Not stated |
| Cervical suture | Available for 1994-1997 | 0 = No1 = Yes9 = Not stated |
|  Antenatal care | Was antenatal care received? Available for 2006 onwards. | 0 = No1 = Yes9 = Not stated |
| Duration of pregnancy (weeks) at first antenatal visit | Duration of pregnancy at first antenatal visit, available from 1994-2010 |  |
| Duration of pregnancy (weeks) at first antenatal visit | Duration of pregnancy at first comprehensive booking or assessment by clinician. Available from 2011 onwards |  |
| Number of antenatal visits | Available from 2011 |  |
| Not booked | Available for 1994-1997 | 0 = No1 = Yes9 = Not stated |
| Smoking during pregnancy | Did the mother smoke at all during pregnancy? Available from 1994-2010 | 0 = No1 = Yes9 = Not stated |
| Smoking during first half of pregnancy | Did the mother smoke during the first half of pregnancy? Available from 2011. | 0 = No1 = Yes9 = Not stated |
| Cigarettes per day during the first half pregnancy | How many cigarettes each day on average were smoked in the first half of pregnancy. Available from 2011 | 0 = Did not smoke1 = Less than 1 per day2 = 1-10 per day3 = More than 10 per day4 = Unknown9 = Not-stated |
| Number of cigarettes smoked on average per day during the first half of pregnancy | Recorded values where “Cigarettes per day during the first half pregnancy” (see above) takes the values 2 or 3. |  |
| Smoking during the second half of pregnancy | Did the mother smoke during the second half of pregnancy? Available from 2011. | 0 = No1 = Yes9 = Not stated |
| Cigarettes per day 2nd half pregnancy | How many cigarettes each day on average were smoked in the second half of pregnancy | 1 = None2 = More than 10 per day3 = 1-10 per day4 = Unknown8 = Did not smoke during pregnancy9 = Not stated |
| Cigarettes per day during the second half pregnancy | How many cigarettes each day on average were smoked in the second half of pregnancy. Available from 2011 | 0 = Did not smoke1 = Less than 1 per day2 = 1-10 per day3 = More than 10 per day4 = Unknown9 = Not-stated |
| Number of cigarettes smoked on average per day during the second half of pregnancy | Recorded values where “Cigarettes per day during the second half pregnancy” (see above) takes the values 2 or 3. |  |
| Maternal diabetes mellitus | Maternal diabetes mellitus—pre-existing diabetes | 0 = No/not stated1 = Yes |
| Gestational diabetes | Gestational diabetes | 0 = No/not stated1 = Yes |
| Chronic hypertension | Chronic maternal hypertension | 0 = No/not stated1 = Yes |
| Pregnancy-induced hypertension | Pregnancy-induced hypertension or pre-eclampsia. Available for 1994-2006 | 0 = No/not stated1 = Yes |
| Pregnancy-induced hypertension - proteinuric | Available from 2006-2010 | 0 = No/not stated1 = Yes |
| Pregnancy-induced hypertension – non-proteinuric | Available from 2006-2010 | 0 = No/not stated1 = Yes |
| Pre-eclampsia | Available from 2011 | 0 = No/not stated1 = Yes |
| Gestational hypertension | Available from 2011 | 0 = No/not stated1 = Yes |
| APH (cause unknown) | Available for 1994-1997 | 0 = No/not stated1 = Yes |
| APH (due to placenta abruptio) | Available for 1994-1997 | 0 = No/not stated1 = Yes |
| APH (due to placenta praevia) | Available for 1994-1997 | 0 = No/not stated1 = Yes |
| Blood group iso-immunisation | Available for 1994-1997 | 0 = No/not stated1 = Yes |
| Prelabour rupture of membranes (>24 hours) | Available for 1994-1997 | 0 = No/not stated1 = Yes |
| Threatened premature labor | Available for 1994-1997 | 0 = No/not stated1 = Yes |
| Maternal Hepatitis B | Mothers who are hepatitis B surface antigen positive. Available for 1994-1997 and from 2011 onwards | 0 = No/not stated1 = Yes |
| Major puerperal infection | Available for 1994-1997 | 0 = No/not stated1 = Yes |
| Third degree tear | Available for 1994-1997 | 0 = No/not stated1 = Yes |
| Shoulder dystocia | Available for 1994-1997 | 0 = No/not stated1 = Yes |
| Retained placenta | Available for 1994-1997 | 0 = No/not stated1 = Yes |
| Post-partum haemorrhage (>600mls) | Available for 1994-1997 | 0 = No/not stated1 = Yes |
| Post-partum haemorrhage requiring blood transfusion | Available from 2006 | 0 = No/not stated1 = Yes |
| Labour onset | Onset of labour | 1 = Spontaneous2 = Induced3 = No labour9 = Not stated |
| Induction and augmentation of labour | Induction and augmentation of labour | 1 = Spontaneous2 = Spontaneous augmented with ARM3 = Spontaneous augmented with oxytocics/PGs4 = No labour5 = Induced - oxytocics/PGs6 = Induced - ARM only7 = Induced - ARM+oxytocics/PGs8 = Induced - other9 = Not stated |
| Main indication for induction/augmentation of labour | Available from 1998 onwards | 1 = Diabetes2 = Hypertensive disease3 = Fetal distress4 = Fetal death5 = Chorioamnionitis6 = Blood group isoimmunisation7 = Prelabour rupture of membranes8 = Prolonged pregnancy (41 or more weeks)9 = Suspected intrauterine growth retardation10 = Other |
| Pain relief: None | Available for 1998-2006 | 0 = No/not stated1 = Yes  |
| Pain relief: Nitrous oxide | Available for 1998-2006 | 0 = No/not stated1 = Yes |
| Pain relief: IM narcotics | Available for 1998-2006 | 0 = No/not stated1 = Yes |
| Pain relief: Local to perineum | Available for 1998-2006 | 0 = No/not stated1 = Yes |
| Pain relief: Pudendal block | Available for 1998-2006 | 0 = No/not stated1 = Yes |
| Pain relief: Epidural/caudal block | Available for 1998-2006 | 0 = No/not stated1 = Yes |
| Pain relief: Spinal anaesthetic | Available for 1998-2006 | 0 = No/not stated1 = Yes |
| Pain relief: General anaesthetic | Available for 1998-2006 | 0 = No/not stated1 = Yes |
| Pain relief: Other | Available for 1998-2006 | 0 = No/not stated1 = Yes |
| Analgesia for labour: Nil | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Analgesia for labour: Nitrous oxide | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Analgesia for labour: Systemic opioids | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Analgesia for labour: Spinal | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Analgesia for labour: Epidural/caudal | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Analgesia for labour: Combined spinal-epidural | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Analgesia for labour: Other | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Anaesthesia for delivery: Nil | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Anaesthesia for delivery: Local to perineum | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Anaesthesia for delivery: Pudendal | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Anaesthesia for delivery: Spinal | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Anaesthesia for delivery: Epidural/caudal | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Anaesthesia for delivery: Combined spinal-epidural | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Anaesthesia for delivery: General anaesthetic | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Anaesthesia for delivery: Other | Available from 2006 onwards | 0 = No/not stated1 = Yes |
| Epidural anaesthetic | Available for 1994-1997 | 0 = No1 = Yes9 = Not stated |
| Presentation | Available for 1994-1997 | 1 = Vertex2 = Other3 = Breech4 = Unknown9 = Not stated |
| Presentation | Available for 1998-2006  | 1 = Vertex2 = Breech3 = Face4 = Brow5 = Other9 = Not stated |
| Presentation | Available from 2006 onwards.  | 1 = Vertex2 = Breech3 = Face4 = Brow5 = Shoulder/transverse6 = Other9 = Not stated |
| Type of delivery | Available for 1994-1997 | 1 = Normal vaginal2 = Forceps3 = Forceps rotation4 = Vacuum extraction5 = Vaginal breech6 = Elective caesarean7 = Emergency caesarean9 = Not stated |
| Type of delivery | Available from 1998-2010 | 1 = Normal vaginal2 = Forceps3 = Vacuum extraction4 = Vaginal breech5 = Caesarean section9 = Not stated |
| Type of delivery | Available from 2011 onwards | 1 = Normal vaginal2 = Forceps3 = Vacuum extraction4 = Vaginal breech – forceps5 = Vaginal breech – no forceps6 = Caesarean section9 = Not stated |
| Main indication for caesarean section | Available for 1998-2006 | 0 = Not applicable1 = Failure to progress: cervical dilatation not stated2 = Failure to progress: cervix 3cm dilated or less3 = Failure to progress: cervix more than 3cm dilated4 = Fetal distress5 = Other9 = Not stated |
| Main indication for caesarean section | Available from 2006 onwards | 0 = Not applicable1 = Failure to progress: cervical dilatation not stated2 = Failure to progress: cervix 3 cm dilated or less3 = Failure to progress: cervix more than 3 cm dilated4 = Fetal distress5 = Elective Repeat Caesarean Section6 = Other Clinical Indication7 = Non-clinical indication9 = Not stated |
| Perineal status | Available for 1998-2006. | 1 = Intact2 = 1st degree tear/graze3 = 2nd degree tear4 = 3rd degree tear5 = 4th degree tear6 = Episiotomy7 = Combined tear and episiotomy8 = Other9 = Not stated |
| Perineal status | Available from 2006 onwards | 1 = Intact2 = 1st degree tear/graze3 = 2nd degree tear4 = 3rd degree tear5 = 4th degree tear6 = Other9 = Not stated |
| Episiotomy | Episiotomy | 0 = No1 = Yes9 = Not stated |
| Surgical repair of vagina or perineum | Available from 1998 | 0 = No1 = Yes9 = Not stated |
| Third stage | Management of the third stage of labour. Available from 2006 onwards | 1 = Active2 = Physiological9 = Not stated |
| Model of care-antenatal: Private obstetrician | Model of care-antenatal: Private obstetrician | 0 = No1 = Yes |
| Model of care-antenatal: Hospital-based medical | Model of care-antenatal: Hospital-based medical | 0 = No1 = Yes |
| Model of care-antenatal: General practitioner | Model of care-antenatal: General practitioner | 0 = No1 = Yes |
| Model of care-antenatal: Hospital-based midwife/midwives | Model of care-antenatal: Hospital-based midwife/midwives | 0 = No1 = Yes |
| Model of care-antenatal: Independent midwife | Model of care-antenatal: Independent midwife | 0 = No1 = Yes |
| Model of care-antenatal: Not applicable | Model of care-antenatal: Not applicable | 0 = No1 = Yes |
| Model of care-birth: Private obstetrician | Model of care-birth: Private obstetrician | 0 = No1 = Yes |
| Model of care-antenatal: Hospital-based medical | Model of care-antenatal: Hospital-based medical | 0 = No1 = Yes |
| Model of care-birth: General practitioner | Model of care-birth: General practitioner | 0 = No1 = Yes |
| Model of care-birth: Hospital-based midwife/midwives | Model of care-birth: Hospital-based midwife/midwives | 0 = No1 = Yes |
| Model of care-birth: Independent midwife | Model of care-birth: Independent midwife | 0 = No1 = Yes |
| Model of care-birth: Not applicable | Model of care-birth: Not applicable | 0 = No1 = Yes |
| Midwifery continuity of carer program | Whether the Mother was in a midwifery continuity of carer program for antenatal, birth and postnatal care. Available from 2011 onwards | 0 = No/not stated1 = Yes |
| Mother referred | Mother referred from another hospital | 0 = No1 = Yes9 = Not stated |
| Mother referral hospital | If mother referred from another hospital, hospital code | Code lists are updated regularly. If information on specific facilities is required, these should be specified by name. |
| Referral prior | Referral prior to the onset of labour | 0 = No1 = Yes |
| Referral post | Referral post onset of labour | 0 = No1 = Yes |
| Baby’s sex | Baby sex | 1 = Male2 = Female3 = Indeterminate9 = Unknown |
| Baby’s Aboriginality | Baby’s Aboriginality from 2011 onwards. See notes above regarding access to this variable | 1 = Aboriginal or TSI2 = Non-Aboriginal9 = Not stated |
| Baby’s Indigenous status | Baby’s Indigenous status from 2011 onwards. See notes above regarding access to this variable | 1 = Aboriginal2 = Torres Strait Islander3 = Aboriginal and Torres Strait Islander4 = None of the above9 = Not stated |
| Plurality of birth | The number of fetuses or babies from the pregnancy. On this basis pregnancy may be classified as single or multiple | 1 = Singleton2 = Twins3 = Tripletsetc9 = Not stated |
| Birth order | The order of birth | 1 = First2 = Second3 = Third etc9 = Not stated |
| Gestational age  | Gestational age measured in weeks, based on the best clinical estimate |  |
| Birthweight  | The newborn infant’s first weight in grams, usually taken within one hour of birth |  |
| APGAR score (1 min) | A numerical scoring system routinely administered one and five minutes after birth to evaluate the condition of the baby. The score ranges from 0 to 10 |  |
| APGAR score (5 min) | As above |  |
| Admission to Special Care Nursery or Neonatal Intensive Care for 4 hours or more | Available for 1994-1997 | 0 = No1 = Yes9 = Not stated |
| Admitted to special care nursery | Available for 1998-2006 | 0 = No1 = Yes9 = Not stated |
| Admitted to neonatal intensive care unit | Available for 1998-2006 | 0 = No1 = Yes9 = Not stated |
| Admission to Special Care Nursery or Neonatal Intensive Care  | Available for 2006 onwards | 0 = No1 = Yes9 = Not stated |
| Was a birth defect the main reason for admission to SCN/NICU? | Available from 1998 onwards | 0 = No1 = Yes9 = Not stated\*\*OTHER\*\* = Invalid data |
| Resuscitation of baby | Available for 1998-2006 | 1 = None2 = Suction3 = Oxygen therapy4 = IPPR by bag and mask5 = Intubation and IPPR6 = External cardiac massage and ventilation7 = Other9 = Not stated |
| Resuscitation of baby | Available for 2006-2010. | 1 = None2 = Suction3 = Oxygen therapy4 = IPPR by bag and mask5 = Intubation and IPPR6 = External cardiac massage and ventilation9 = Not stated |
| Resuscitation of baby | Available from 2011 onwards | 1 = None2 = Suction3 = Oxygen therapy4 = IPPR: mask5 = IPPR: with intubation6 = External cardiac massage and ventilation9 = Not stated |
| Admitted to special care nursery for observation only | Available for 1998-2006. | 0 = No1 = Yes9 = Not stated |
| Vitamin K | Vitamin K administered to baby. Available for 2006 onwards. | 1 = Oral2 = IM3 = None9 = Not stated |
| Hepatitis B birth dose | Hepatitis B birth dose administered to baby. Available for 2006 onwards. | 0 = No1 = Yes9 = Not stated |
| Baby’s date of discharge or transfer | Available for the period 1994 onwards. Full date will only be supplied if sufficient justification is supplied that age is insufficient. |  |
| Baby’s discharge status | Baby’s discharge status | 1 = Discharged2 = Stillborn3 = Neonatal death4 = Transferred5 = Transferred and died9 = Not stated |
| Baby’s date of death | Full date will only be supplied if sufficient justification is supplied that age is insufficient.  |  |
| Hospital of baby transfer | Hospital that baby is transferred to after birth | Code lists are updated regularly. If information on specific facilities is required, these should be specified by name. |
| Perinatal death type | Perinatal outcome | 1 = Not a perinatal death2 = Stillborn3 = Neonatal death4 = Postneonatal death9 = Not stated |
| Baby’s place of birth | Place of birth | 1 = Hospital2 = Birth Centre3 = Planned BC/hospital admission4 = Planned home birth5 = Planned HB/hospital admission6 = Born before arrival9 = Not stated |
| Mother’s discharge status | Mother’s discharge status | 1 = Discharged2 = Died3 = Transferred9 = Not stated |
| Hospital of mother transfer | Hospital that mother is transferred to after birth | Code lists are updated regularly. If information on specific facilities is required, these should be specified by name. |
| Hospital maternity service level | Maternity service level as per the Department of Health’s *Guide to the Role Delineation of Hospitals* | See Attachment C – Maternity Service Level |
| Confinement based on first baby | Refers to a woman having given birth. Note: with a multiple pregnancy, one confinement will result in more than one birth | 0 = No1 = Yes |

# Attachment 1 – Area Health Services (AHS)

|  |  |
| --- | --- |
| Code |  Description  |
| X160 | Children’s Hospital at Westmead |
| X170 | Justice Health |
| X500 | Sydney South West AHS |
| X510 | South Eastern Sydney & Illawarra AHS |
| X520 | Sydney West AHS |
| X530 | Northern Sydney & Central Coast AHS |
| X540 | Hunter & New England AHS |
| X550 | North Coast AHS |
| X560 | Greater Southern AHS |
| X570 | Greater Western AHS |
| X900 | Ambulance Service of NSW |
| X910 | NSW Not Further Defined |
| X920 | Victoria |
| X930 | Queensland |
| X940 | South Australia |
| X950 | Western Australia |
| X960 | Tasmania |
| X970 | Northern Territory |
| X980 | Australia Capital Territory |
| X990 | Other Australian Territories |
| X997 | Overseas Locality |
| X998 | No Fixed Locality |
| X999 | Not Stated/Other |

# Attachment 2 – Local Health Districts

|  |  |
| --- | --- |
| Code |  Description  |
| X700 | Sydney LHD  |
| X710 | South Western Sydney LHD  |
| X720 | South Eastern Sydney LHD  |
| X730 | Illawarra Shoalhaven LHD  |
| X740 | Western Sydney LHD  |
| X750 | Nepean Blue Mountains LHD  |
| X760 | Northern Sydney LHD  |
| X770 | Central Coast LHD  |
| X800 | Hunter New England LHD  |
| X810 | Northern NSW LHD  |
| X820 | Mid North Coast LHD  |
| X830 | Southern NSW LHD  |
| X840 | Murrumbidgee LHD  |
| X850 | Western NSW LHD  |
| X860 | Far West LHD  |
| X630 | Sydney Children’s Hospitals Network |
| X690 | St Vincent’s Health Network |
| X180 | Forensic Mental Health Network |
| X170 | Justice Health |
| X910 | NSW not further specified |
| X920 | Victoria |
| X921 | Albury (Victoria in-reach)  |
| X930 | Queensland |
| X940 | South Australia |
| X950 | Western Australia |
| X960 | Tasmania |
| X970 | Northern Territory |
| X980 | Australian Capital Territory |
| X990 | Other Australian Territories |
| X997 | Overseas Locality |
| X998 | No Fixed Address |
| 9999 |  Missing |

# Attachment 3 – Maternity Service Level

Level 1: local maternity service (no births), postnatal only for women with normal outcomes.

Level 2: small maternity services, normal‑risk pregnancy and births only. Staffed by general practitioners and midwives.

Level 3: country district and smaller metropolitan services, care for mothers and infants at normal‑ selected moderate risk pregnancies and births. Full resuscitation and theatre facilities available. Rostered obstetricians, resident medical staff and midwives. Accredited general practitioners‑specialist anaesthetist on call. Has Level 2b neonatal care.

Level 4: regional‑referral‑metropolitan district services. Birth and care for mothers and/or babies with moderate risk factors. Obstetricians and paediatrician available 24 hours a day, 7 days a week. Rostered resident medical staff, specialist anaesthetist on call. Has Level 2b neonatal care.

Level 5: regional referral‑metropolitan services, care for mothers and infants known to be at high risk. Able to cope with complications arising from these risk factors. Has Level 2a neonatal care.

Level 6: (tertiary)‑specialist obstetric services (supra regional). All functions‑normal, moderate and high-risk births. Has Level 3 neonatal intensive care.