Stillbirth Clinical Care Standard: 6a-Proportion of women who had a planned birth who received written and verbal information on the potential benefits and harms of planned birth, including the timing of intervention

Exported from METEOR

(AIHW's Metadata Online Registry)

© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website’s material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at https://creativecommons.org/licenses/by/4.0/.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

# Stillbirth Clinical Care Standard: 6a-Proportion of women who had a planned birth who received written and verbal information on the potential benefits and harms of planned birth, including the timing of intervention

|  |
| --- |
| Identifying and definitional attributes |
| Metadata item type: | Indicator |
| Indicator type: | Indicator |
| Short name: | 6a-Proportion of women who had a planned birth who received written and verbal information on the potential benefits and harms of planned birth, including the timing of intervention |
| METEOR identifier: | 766724 |
| Registration status: | [Australian Commission on Safety and Quality in Health Care](https://meteor.aihw.gov.au/RegistrationAuthority/18), Standard 04/11/2022 |
| Description: | Proportion of women who had a planned birth who received written and verbal information on the potential benefits and harms of planned birth, including the timing of intervention. |
| Indicator set: | [Stillbirth Clinical Care Standard](https://meteor.aihw.gov.au/content/766607)        [Australian Commission on Safety and Quality in Health Care](https://meteor.aihw.gov.au/RegistrationAuthority/18), Standard 04/11/2022 |

|  |
| --- |
| Collection and usage attributes |
| Computation description: | ‘Planned birth’ is defined as giving birth with the support of induction of labour or by planned caesarean section.  Exclude women who:* Had an emergency caesarean section, and
* Gave birth spontaneously before 39 weeks (273 days).

Presented as a percentage. |
| Computation: | (Numerator ÷ Denominator) x 100 |
| Numerator: | Number of women in the denominator with documentation in their medical record confirming they were provided both written and verbal information on the potential benefits and harms of planned birth, including the timing of intervention.  |
| Denominator: | The number of women who had a planned birth. |
| Representational attributes |
| Representation class: | Percentage |
| Data type: | Real |
| Unit of measure: | Service event |
| Format: | N[NN] |
| Accountability attributes |
| Reporting requirements: | These indicators are for local quality improvement. Monitoring the implementation of the Stillbirth Clinical Care Standard (ACSQHC, 2022) will assist in meeting some of the requirements of the National Safety and Quality Health Service Standards (ACSQHC, 2021). |
| Organisation responsible for providing data: | Not applicable |
| Accountability: | Not applicable |
| Other issues caveats: | Applicable settings - Hospitals where maternity care is provided. |
| Release date: | 04/11/2022 |
| Source and reference attributes |
| Submitting organisation: | Australian Commission on Safety and Quality in Health Care |
| Reference documents: | Australian Commission on Safety and Quality in Health Care. Stillbirth Clinical Care Standard. Sydney: ACSQHC; 2022 |