



Cardiotocography Monitoring Policy

1. Purpose

The purpose of the *Cardiotocography Monitoring Policy* is to mandate minimum requirements for cardiotocography (CTG) monitoring and interpretation 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 in pregnancies that require fetal monitoring because of identified clinical risk factors. 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.

To the extent that the requirements contained within this Policy are applicable to the services purchased from contracted health entities, Health Service Providers are responsible for ensuring these requirements are accurately reflected in the relevant contract and managed accordingly.

3. Policy Requirements

3.1 Education

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

3.2 CTG Monitoring

Health Service Providers 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 interpreting and 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*.

3.3 Clinical care escalation

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

3.4 Clinical Audit

Health Service Providers must:

- Audit their clinical practice and the education compliance of their staff as outlined in section 5 of the *Cardiotocography Monitoring Standard*.
- The results of this audit should be reviewed and approved by an appropriate clinical governance committee, who would also be responsible for setting the frequency of these audits.

4. Compliance Monitoring

Health Service Providers are responsible for ensuring compliance with this Policy. Health Service Providers must maintain clinical audit results, and education database reports required by this policy. These must be presented to the System Manager on request.

The System Manager will also 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 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 mandatory pursuant to this Policy:

- [Cardiotocography Monitoring Standard](#)
- [WA Health Consent to Treatment Policy](#)
- [MP 0145/20 Information Storage Policy](#)

6. Supporting Information

The following information is not mandatory but informs and/or supports the implementation of this Policy:

- [Intrapartum Fetal Surveillance Guideline Fourth Edition 2019. RANZCOG](#)
- [ACM National Midwifery Guidelines for Consultation and Referral 4th Edition](#)
- [Australian Commission on Safety and Quality in Health Care. The Australian Charter of Healthcare Rights: a guide for healthcare providers. 2nd Edition. 2019](#)
- [Australian Commission on Safety and Quality in Health Care. Shared Decision Making. 2019](#)
- [Australian Commission on Safety and Quality in Healthcare. Recognising and Responding to Clinical Deterioration Standard. 2019](#)

7. Definitions

The following definition(s) are relevant to this Policy.

Term	Definition
CTG monitoring	Monitoring and assessment of fetal heart rate and uterine activity using cardiotocography. Can be conducted in the antepartum and intrapartum periods.
Identified clinical risk factors	Antenatal and intrapartum factors that increase risk of fetal compromise where intrapartum cardiotocography is recommended, Intrapartum Fetal Surveillance Clinical Guideline RANZCOG 2019 .
Maternity services	Specialised services that include the assessment and treatment of women and babies during pregnancy, labour, birth and the postnatal period.

8. Policy Contact

Enquiries relating to this policy may be directed to:

Title: Principal Midwifery Advisor
 Directorate: Chief Nursing and Midwifery Office
 Email: CNMO.CED@health.wa.gov.au

9. Document Control

Version	Published date	Effective from	Review date	Amendment(s)
MP 0076/18	10 January 2018	10 January 2018	March 2021	Original version
MP 0076/18 v.2.0	16 June 2021	16 June 2021	June 2024	Major amendments as listed below.
<ul style="list-style-type: none"> Policy transitioned to the current Policy template. Clarification provided on interpretation practices and audit requirements. As a full Policy review was undertaken, a new review cycle will now commence. 				
MP 0076/18 v.2.1	1 October 2021	1 October 2021	June 2024	Minor amendment as listed below.
<ul style="list-style-type: none"> Update to supporting information and policy contact email. 				
MP 0076/18 v.2.2	20 December 2023	20 December 2023	June 2024	Amendments as listed below.
<ul style="list-style-type: none"> Policy ownership changed from Executive Director, Patient Safety and Clinical Quality to Principal Midwifery Advisor, Chief Nursing and Midwifery Office. Policy contact section amended to reflect the policy ownership change. 				

10. Approval

Approval by	Dr David Russell-Weisz, Director General, Department of Health
Approval date	20 December 2017

This document can be made available in alternative formats on request for a person with a disability.

© Department of Health 2021

Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the *Copyright Act 1968*, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.