

Home Birth Supplies Program (HBSP)

Leaving Checklist

The checklist below details the steps to be taken by HBSP HA lead or HBSP site lead and care providers when a care provider leaves a health authority or primary hospital site.

(Check when complete)

1.0 Product Distribution Centre (PDC)

- ☐ If reusable items were ordered from the PDC, these have been returned to the primary hospital site (eg. doppler, stethoscope, etc). (See Appendix I for detailed list)
- ☐ PDC account for care provider cancelled by manager ([please use this form](#)).

2.0 Hospital instrument sets

- ☐ Hospital instrument sets have been returned to primary hospital site for reprocessing and re-distribution. (See Appendix II for detailed list) OR NO instrument sets provided to care provider and waiver is on file with the HBSP HA or site lead.

3.0 Oxygen tanks

- ☐ Oxygen tanks have been returned to primary hospital site for refilling and re-distribution.

4.0 Submission of records for home births

- ☐ All required forms for all home births have been submitted to the location designated by the primary hospital site or health authority

<p>Signature of care provider:</p> <p>_____</p> <p>Name (print):</p> <p>_____</p> <p>Date signed (dd/mm/yyyy):</p> <p>_____</p>	<p>Signature of witness (HBSP HA lead or HBSP site lead):</p> <p>_____</p> <p>Name of witness (print):</p> <p>_____</p> <p>Date witnessed (dd/mm/yyyy):</p> <p>_____</p>
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Original – HBSP HA or site lead

Copy – care provide

Appendix I: Reusable Equipment List

PDC Code	Description	Previous order date (dd/mm/yyyy)	Returned Check (✓)	Notes
6515871476	CHARGER/ADAPTER AC/DC DEVILBISS EA		<input type="checkbox"/>	
6680990091	CHARGER/ADAPTER AC/DC LAERDAL COMP SUCT		<input type="checkbox"/>	
6515871477	CORD POWER AC 7314P-613 DEVILBISS CHARGE		<input type="checkbox"/>	
6515110800	DOPPLER FETAL AUD 2MHZ PROBE HUNT LG 1/BX		<input type="checkbox"/>	
6515110090	CARRYING CASE FOR HUNT LG DOPPLERS 1EA		<input type="checkbox"/>	
6515508383	HEADLAMP LED 2075 LUMENS DUAL COAST		<input type="checkbox"/>	
6515110158	OXIMETER PULSE DIGITAL EDAN EA		<input type="checkbox"/>	
6515508597	OXIMETRY NEONATAL WRAP SENSOR REUSE EA		<input type="checkbox"/>	
6515508639	PAD HEATING DIGITAL 12" X 24" BIOS EACH		<input type="checkbox"/>	
6515508602	REGULATOR OXY CP FOR SIZE "D" O2 TANK EA		<input type="checkbox"/>	
6515160180	SPHYGMOMANOMETER KIT ADLT DURASHOCK		<input type="checkbox"/>	
6515160182	SPHYGMOMANOMETER CUFF RUSE LG ADLT		<input type="checkbox"/>	
6515160189	SPHYGMOMANOMETER CUFF RUSE SM ADLT		<input type="checkbox"/>	
6515990001	SPHYGMOMANOMETER INFLATION BULB WA		<input type="checkbox"/>	
6515160118	STETHOSCOPE DUAL HEAD LITTMANN BLK EA		<input type="checkbox"/>	
6515508398	STETHOSCOPE FETAL 22" ALMEDIC EA		<input type="checkbox"/>	
6515110153	STETHOSCOPE INFANT LITTMAN CLASSIC EA		<input type="checkbox"/>	
6515872083	SUCTION UNIT W/800ML CANIST DEVILBIS KIT		<input type="checkbox"/>	
6685190007	THERMOMETER DIGITAL SURETEMP W/A EA		<input type="checkbox"/>	

Appendix II: Hospital instrument set list

Bundles issued to care provider:

two birth bundles, two suture bundles, one UVC bundle and one episiotomy scissors (note: some sites include episiotomy scissors in birth bundles)

Or

Care provider declined issue of hospital instrument sets and HBSP hospital instrument set waiver is on file with the HBSP HA or site lead