Freedom of Information – Time of Birth

What records do you hold relating to 'Time of Birth'?

The Royal Women's Hospital hold birth information from 1889, when the hospital first opened, to date. Time of Birth information is recorded and stored in various formats; labour ward case books, birth registration books, microfilm, microfiche, paper and electronic records. Older records such as birth registers and labour ward case books are held offsite at the Public Records Office of Victoria (PROV). Access to these books is open to the public if the date of birth is older than 100 years e.g. 01/01/1900. If you are wanting to access these records, please visit PROV's website for further information <u>https://prov.vic.gov.au</u>

If the date of birth is less than 100 years, please complete a *'Time of Birth'* application form. Time of birth information is limited to date and time of birth, weight and length of a baby. <u>Please note:</u> If your Time of Birth information is located at PROV and our team goes there to complete your request, there will be a minimum of 2 hour search fee incurred. Please see page 3 of the *'Time of Birth'* application for a breakdown of access charges.

The Women's is committed to protecting the privacy of your personal health and other information. To view the Women's privacy collection statement please visit www.thewomens.org.au/patients-visitors/your-privacy

How do I access my live birth record or obstetric records?

Please complete a '*Freedom of Information*' application form which can be found on our website https://www.thewomens.org.au/patients-visitors/patient-record-requests

Once a valid request is received with the application fee and supporting documentation, we have 30 days to provide you with our decision. We may need to extend the time in which a decision is due if we require you to pay a deposit or are required to consult with third parties as part of your request. If the time is extended, we will inform you of this and provide you with a new due date.

How to I apply for my Time of Birth?

Under Section 17 of the Act, a request to access information is deemed as valid if:

1. Submit a Time of Birth Application

- You complete a RWH Time of Birth application. Please note that <u>All requests</u> must include proof of identity (photo identification) e.g. drivers licence, passport etc. and a copy of your birth certificate. If you have had a change of name/surname, documentation to support this e.g. extract, marriage certificate etc. Our team may be in contact with you if we require further supporting documentation
- Pay the initial application fee of \$32.70.
 <u>Please note</u>: there will be other access charges to process and complete your Time of Birth request depending on where your information is located.
 <u>Unfortunately we do not waive fees to access this service.</u>

2. After your request is submitted

Once a valid request has been made, we have 30 days from that date to provide you with our decision. We may need to extend the time in which a decision is due if we are require more time to locate your time of birth information. If the time is extended, we will inform you of this and provide you with a new due date.

3. Access Charges

In accordance with *Freedom of Information (Access Charges) Regulations 2004* there will be charges to access your time of birth information. In addition to the application fee you will be advised by our team of final costs once your request has been processed. The final invoice must be paid by the due date before the information will be released to you. Current access charges are outlined on page 3 of the *'Time of Birth'* application form or via our website.

Can I apply for a birth certificate or obtain another copy of my birth certificate through RWH?

RWH does not issue or provide birth certificates. You can apply for this directly through Birth Deaths and Marriages Victoria, please contact them on 1300 369 367 or visit their website for further information <u>www.bdm.vic.gov.au</u>. We can, however, provide you with confirmation that you were born here to assist you with your Birth Deaths and Marriages application. Please complete a '*Time of Birth*' form or contact the FOI team for assistance.

I am researching my family history, can you help me?

In most cases we can assist especially if your research is related to births at RWH. For children that were born at RWH, the location of birth recorded on their birth certificate will be either 'Carlton' or 'Parkville'. If our team cannot assist you we will provide you with other resources and contacts to help you in your search.

Can I request access to someone else's Time of Birth e.g. my child, my partner, my relative?

Yes, however consent may be required depending on relationship. Please call our FOI team to discuss your time of birth request requirements.

I have questions about Time of Birth or need assistance with the process

Our FOI team will be more than happy to assist you and answer any further questions that you might have, our contact details are:

Address: Freedom of Information Department Health Information Services The Royal Women's Hospital Locked Bag 300 Parkville VIC 3052
 Phone:
 (+61 3) 8345 2610

 Fax:
 (+61 3) 8345 2642

 Email:
 foi@thewomens.org.au

Website: www.thewomens.org.au/patients-visitors/patient-record-requests Office Hours: Monday – Friday 8:00am to 4:30pm



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SECTION 1 – APPLICANT/PATIENT DETAILS			
Surname: Given Names:			
Organisation (if applicable) RWH MRN (if known)			
Date of Birth:/// Phone number:			
Address:			
Suburb: Postcode:			
Email:			
Is this in relation to an adoption? (please tick) Yes No If YES, please attach your birth certificate with name you were given at birth before you were adopted, Birth Certificate issued with your current name after your adoption and any other documentation you have obtained. Adoption records are held by Adoption Information Services, you can contact this service via email <u>adoptionrecords@justice.vic.gov.au</u>			
Are you the applicant AND mother/child applying for access to your Time of Birth Information? (please tick)			
Yes No – What is your relationship to the Patient (Mother/Child)?			
Name of the child: If you are applying for someone else's information, please provide consent and supporting documentations (see page 3 for details)			
SECTION 2 – PATIENT/MOTHER'S DETAILS			
Mother's Surname: Mother's Given Names:			
Mother's Maiden name:///			
Other Names known as at the time of hospital presentation (if known and different from above):			
Previous address at the time of admission (if known)			
FORM OF ACCESS (please tick):			
I would like a digital copy of my Time of Birth Information to be sent by email (Access Fees apply)			
I would like a printed copy of my Time of Birth Information to be sent by post (Access and Postage fees apply)			
SECTION 3 – DETAILS OF REQUEST			
In order for us to make an informed decision regarding your request, please tell us why are you wanting to access your Time of Birth information e.g. personal use, family research, etc. (please specify):			



SECTION 4 - AUTHORITY TO ACCESS INFORMATION:

I, the applicant, acknowledge that:

- My application will be processed in accordance with the Freedom of Information Act 1982 (VIC) and that I have provided valid authority
- Charges will apply under the *Freedom of Information Act 1982 (VIC)* to access Time of Birth details. The initial application fee of \$32.70 will be paid upon submission of a valid Time of Birth application.
- I understand that I will be supplied with an invoice with fees and charges incurred for my request.
- I understand that my Time of Birth information will not be sent to me until all outstanding fees and charges have been paid by the invoice due date.
- I understand that fees will not be waived to access my Time of Birth information even if I possess a Healthcare/Concession card
- The information and documents that I provide will be used to process my request and will be handled in accordance with the Victorian Privacy Laws.
- RWH has 30 days to send my Time of Birth information from the date a valid request is received (extensions may apply)

AND PATIENT/MOTHER OR PATIENT/CHILD

SECTION 4.1 - APPLICANT AUTHORITY (WHO IS NOT THE PATIENT) TO BE SIGNED BY BOTH APPLICANT

- The individual must sign the below authorisation and you have to provide evidence that you have the authority to access this information on behalf of the individual. Any additional information can be provided in the space below
- If you are unable to obtain the proper consent from the individual, information that you receive may be redacted in accordance with the *Freedom of Information Act 1982 (Vic)*. To assist us in assessing your application and making an informed decision regarding the release of individual's time of birth information, please explain the purpose of your application in the <u>'additional information'</u> field below and why you believe it is reasonable to release the records to you
- In relation to a deceased individual, access by the most senior available next of kin is not guaranteed. To assist
 us in assessing your application and making an informed decision regarding the release of a deceased
 individual's time of birth information, please explain the purpose of your application in the <u>'additional information</u>'
 field below and why you believe it is reasonable to release the information to you

I,	(Address)
authorise The Women's to release information about $\hfill\square$ MYSELF	
to the applicant	
Of	
(Applicants organisation/Addre	ss)
Patient (Mother/Child)/Next of Kin Signature	Date:///
Additional Information:	

The Women's Time of Birth Application Form



		victoria	
CHECKLIST IN	IFORMATION – Please ensure that the follow	ving is submitted	
Completed Time of Birth Application Form			
Completed payment slip			
Copy of Pl	hoto ID (e.g. Driver's licence, Passport, Key pas	ss etc.)	
Copy of B	irth Certificate		
☐ If you have	☐ If you have had a change of name, documentation to support this (e.g. Marriage Certificate, extract etc.)		
All Adoption paperwork (if applicable) including:			
 Birth Certificate with your birth mother's name and your original name issued before you were adopted Birth Certificate issued with your current name after your adoption Other documentation you have obtained from DHHS 			
If you are the APPLICANT (WHO IS NOT THE PATIENT), in addition to the above, please provide the following:			
Completed and signed consent form from the patient – Section 4.1 (Applicant Authority who is not the patient)			
The Patient Mother/Child Photo ID			
Documentation to prove relationship (e.g. Birth Certificate, Marriage Certificate, etc.)			
Please note: We may need you to provide additional supporting documentation but will contact you if this is required			
ACCESS FEES AND CHARGES (effective from 1 July 2024)			
Application Fee		\$32.70 (non-refundable)	
Search Fee (pe	r hour or part thereof)	\$24.50	
PROV Request	s	\$24.50	
Microfilm/Microf	film Search Fee	\$24.50	
Offsite record		\$ As per ZircoData	
Time of Birth D	Delivery Options		
		Free of Charge	
Postage (Regis	tered within Australia/International)	\$ As per Aust. Post	
PAYMENT			
Cheque ('The Royal Women's Hospital') Credit Card – Complete details below			
□ Visa □ MasterCard			
Cardholder Name: Exp. Date:/			
Card Number:			
Signature:			
Please return (post or email): application, supporting documentation and payment to			
Address:	Freedom of Information Department	Phone: (+61 3) 8345 2610	
	Health Information Services	Fax: (+61 3) 8345 2642	
	The Royal Women's Hospital	Email: foi@thewomens.org.au	
	Locked Bag 300 Parkville VIC 3052		
Website: www.thewomens.org.au/patients-visitors/patient-record-requests			
Office Hours: Monday – Friday			
	8:00am – 4:30pm		

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