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 https://prov.vic.gov.au

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.

Please note: 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 do 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 www.bdm.vic.gov.au. 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 Phone: (+61 3) 8345 2610

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 to 4:30pm

01/07/2025 - 30/06/2026

The Women's Time of Birth Application Form



SECTION 1 – APPLICANT/PATIENT DETAILS			
Surname: Given Names:			
Organisation (if applicable)			
Date of Birth:/ Phone number:			
Address:			
Suburb: Postcode:			
Email:			
Is this in relation to an adoption? (please tick) \square Yes \square 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 adoptionrecords@justice.vic.gov.au			
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):			

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The Women's Time of Birth Application Form



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 (Access Charges) Regulations 2004 to access Time of Birth details. The initial application fee of \$33.60 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)

Applicant signature	Date:/	

SECTION 4.1 - REQUEST FOR TIME OF BIRTH INFORMATION RELATING TO ANOTHER INDIVIDUAL I, the applicant, acknowledge that:

- The individual must sign the below authorisation granting the applicant access their medical information. If the applicant is unable to obtain signed consent from the individual, information may be withheld 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, Of	
(Patient Mother/Child or Next of Kin)	(Address)
authorise The Women's to release information about $\hfill\Box$ MYSELF	□ PATIENT NAME
to the applicant	
(Applicants Name)	
Of	
(Applicants organisation/Addres	
Patient (Mother/Child)/Next of Kin Signature	
Additional Information:	

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The Women's Time of Birth Application Form



CHECKLIST INFORMATION - Please ensure that the following	ng is submitted		
☐ Completed Time of Birth Application Form			
☐ Completed payment slip			
☐ Copy of Photo ID (e.g. Driver's licence, Passport, Key pass etc.)			
☐ Copy of Birth Certificate			
☐ If you have had a change of name, documentation to suppo	ort 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 Please note: We may need you to provide additional supporting documentation and our team will contact you if this is required			
If you are requesting for someone else's Time of Birth, in ad-	dition to the above, please provide the following:		
☐ Signed consent form from the patient – Section 4.1 Reque	st for time of birth information relating to another		
Individual)			
☐ The Patient Mother/Child Photo ID			
Documentation to prove relationship (e.g. Birth Certificate, N			
Please note: We may need you to provide additional supporting documen			
Application Fee ACCESS FEES AND CHARGES (effective from 1 July 2025) 33.60 (non-refundable)		
• •	25.20		
Additional Access Charges	05.00		
	25.20 As per ZircoData		
Offsite record recall fee	76 per Zireobata		
Time of Birth Delivery Options	4.01		
	ree of Charge As per Aust. Post		
1 Ostage (Express Registered Within Adstralia/International)	As per Aust. 1 ost		
PAYMENT			
☐ Credit Card – Complete details below ☐ C	heque ('The Royal Women's Hospital')		
☐ Visa ☐ MasterCard Time	of Birth Application Fee Amount: \$33.60		
Cardholder Name:			
Card Number:	Exp. Date:/		
Signature:			
Please return (post or email): application, supporting documentation and payment to			
Address: Freedom of Information Department The Royal Women's Hospital Locked Bag 300 Parkville VIC 3052	Phone: (+61 3) 8345 2610 Email: foi@thewomens.org.au		
Website: www.thewomens.org.au/patients-visitors/patient-	record-requests		
	h and other information. To view the Women's privacy collection		