

The Ministry of Social Services stopped issuing birth alerts to hospitals providing maternal care effective February 1, 2021. This change represents an important opportunity to increase focus on providing the patients and families we serve with the supports they need.

By collaboratively working to keep families together, we are avoiding the trauma of separating infants from their families. In particular, Indigenous families have historically been over-represented. This approach supports a woman's right to make decisions for her child's future and children to grow up in their culture with their family.

### What is my role as a front-line provider?

Contribute to the health, safety and well-being of the maternal patients, infants and families we serve. As part of the roles and responsibilities of health professionals, we work together with patients to identify needs and connect with the appropriate supports.

The care of mothers and babies requiring additional supports to ensure safe discharge will not change. In order to meet this need, longer time in hospital may be required. We encourage you to think about this additional time in hospital the same as the additional time a patient with a medical condition might require prior to going home.

### Supporting patients

**Social Work:** If you work in a facility where social work support is available, continue to make a referral to the social worker who will further assess the needs, provide support and appropriate referrals for the patient.

**First Nation Métis Health Services (FNMHS):** If you work in a facility with FNMHS support available, please make a referral and a health educator will be connected to provide support for Indigenous patients and families.

You can also refer to the [Community Resource List](#) to help access supports available for patients in the community. Please ensure that patient consent is obtained before sharing patient information.

Ensure that communication and documentation of concerns (i.e. coping, supports potentially required, observations, adjustments to parenting issues) are made to Public Health in postpartum referral regarding family's needs for additional support and follow up.

The Ministry of Social Services's job, like ours, is to help connect families with supports. If gaps in support remain, Child Protection Intake and Mobile Crisis Services are available for consultation without disclosing patient identity.

### Reporting when required

According to the Saskatchewan Child Abuse protocol: *"If you suspect that abuse/neglect has occurred, is occurring, or will likely occur, you have a duty to report to the Ministry of Social Services and it cannot be delegated to another individual. Abuse/neglect includes:*

- Physical abuse
- Sexual abuse/exploitation
- Physical neglect
- Emotional maltreatment
- Exposure to interpersonal violence
- Failure to provide essential medical treatment"

If either of these situations occurs, please reach out for guidance to a manager, a charge nurse, the hospital social worker, and if the child has Indigenous ancestry (through mother or father), a First Nations and Métis Health Services health educator. FNMHS will then ensure an Elder and/or health educator is present at the time of patient contact with Ministry of Social Services to support culturally responsive services.

Additional information on how and when to report abuse/neglect can also be found at:

<http://publications.gov.sk.ca/documents/17/85210-Duty-to-report.pdf>