

Tēnā Koe

Attached is the Primary Maternity Services Provider Safety Check Employer Verification form.

Please complete this form and return along with supporting documents to:

**Email:** [adminsUPPORT@health.govt.nz](mailto:adminsUPPORT@health.govt.nz) or

**Post:** Primary Care Team  
Sector Operations  
Te Whatu Ora - Health New Zealand  
Private Bag 1942  
Dunedin 9054

This form confirms to Te Whatu Ora that a **core children's worker safety check** ('Safety Check') has been completed for the service provider in accordance with the Children's Legislation\* and that the service provider has adopted or developed a **child protection policy** as required by the Children's Legislation.

This form is to be completed by the current or former employer of the primary maternity services provider and verifies that they have passed a core children's worker safety check within the past three years.

Please **do not** include documents such as police vetting reports and identity verification in your correspondence.

For further information please contact us at:

**Phone:** 0800 855 066, or

**Email:** [adminsUPPORT@health.govt.nz](mailto:adminsUPPORT@health.govt.nz)

Ngā mihi,

**nā**

**Contract Support  
Sector Operations**

# Primary Maternity Services Provider Core Children's Worker Safety Check Employer Verification Form

July 2023

## Details of Maternity Service Provider

First name(s)

Last name

Professional body registration number

## Employer Details

Organisation/Company is Provider's

☐ Current Employer

or

☐ Former Employer

Organisation/Company Name of  
Employer completing safety check

Full name of person completing this form

Position

Phone number and email address

## Employer Confirmation of Checks Required under the Children's Act

☐ I **confirm** that the above-named maternity service provider has **passed** the **appropriate check**\* that meets the safety checking requirements for a **core children's worker**\*\* under the Children's Legislation, **and**

☐ I **confirm** the safety check was issued on \_\_\_\_/\_\_\_\_/\_\_\_\_ (date)

## Declaration

I declare that the information provided in this form is true and correct and that I have the designated authority to complete this verification on behalf of the employer.

Print name

Signature

Date signed

\* See requirements for the checking of children's workers on the Ministry of Health website [here](#), as there are different requirements depending on whether a core children's worker safety check has been completed within the last 3 years

\*\* Providers of primary maternity services are considered core children's workers and must have the check required of a core children's worker including having a Child Protection Policy in place in accordance with the requirements of the Children's Legislation

# Primary Maternity Services Provider Core Children's Worker Safety Check Employer Verification Form

July 2023

## Purpose

The purpose of this form is to:

Provide confirmation to Te Whatu Ora that:

- 1 a **core children's worker safety check** has been completed, and
- 2 a **child protection policy** has been adopted

The **core children's worker safety check** ('Safety Check') and **child protection policy** must meet the requirements of the Children's Act 2014, and the Children's (Requirements for Safety Checks of Children's Worker) Regulations 2015, ('the Children's Legislation').

**Safety Checks are portable.** A Safety Check completed by an employer at another organisation or practice can also be used to claim under the Primary Maternity Services Notice 2021 (the Notice), as long as the Safety Check was completed within the preceding three years.

**This form is to be completed by the current or former employer of a primary maternity services provider to verify that the employer has completed a Safety Check in accordance with the Children's Legislation for that provider in the past three years.**

## Information for the Maternity Service Provider

You can submit this form as verification that you have passed a core children's worker safety check under the Children's Legislation, and that this safety Check was completed by an employer, (such as a hospital, birthing facility, or primary care practice).

Use this form when you are applying for a new authorisation or have an existing authorisation to claim for primary maternity services under the Notice, and you need to **confirm** to Te Whatu Ora that you have been safety checked as a core children's worker.

This form needs to be filled out by the employer who completed your Safety Check.

Once the form has been completed you will need to email a copy to [DunedinAASupport@health.govt.nz](mailto:DunedinAASupport@health.govt.nz) or post to:

Primary Care  
Te Whatu Ora  
Private Bag 1942  
Dunedin 9054

Please **do not** include documents such as police vetting reports and identity verification in your correspondence.

## Information for the Employer

By completing this form, you attest that the information provided is correct, complete, and up to date as of the date the safety Check was issued.

This form can be completed by a previous employer only if the Safety Check is less than three years old.

## Safety Checking Requirements

Maternity providers who have not been issued with a Safety Check within the past 3 years require a **new** check for a core children's worker. Maternity providers who have completed a Safety Check within the past 3 years require an **updated** check for a core children's worker. The following table shows what is included in each of the Safety Checks:

Included in Core Children's Worker Safety Check	New Check for Core Children's Worker (Safety Check not Issued within the past 3 years)	Updated Check for Core Children's Worker (Safety Check issued within the past 3 years)
ID Verification	Yes	Yes
Police Vetting	Yes	Yes
Professional Membership Check (registration and annual practicing certificate)	Yes	Yes
Employment or Personal References	Yes	No
Employment History	Yes	No
Interviews with the Applicant	Yes	No
Final Assessment	Yes	Yes

## Audit

In order to comply with the requirements of the Children's Legislation, Te Whatu Ora must be satisfied that all persons providing primary maternity services under the Primary Maternity Services Notice 2021 are safety checked and have a child protection policy in place.

Te Whatu Ora may from time-to-time audit authorisations under the Primary Maternity Services Notice 2021 to ensure authorisation holders have been safety checked to the required standards.

Where an employer has confirmed the completion of a Safety Check, they must be able to provide documentary evidence of that Safety Check should an audit occur.

## More Information

For more information on the Primary Maternity Services Notice, core children's worker safety checking and child protection policies please see the links below:

Ministry of Health - [Primary Maternity Services](#)

Ministry of Health - [Children's Action Plan: Children's worker safety checking and child protection policies](#)

Ministry of Health - [How to obtain a Safety Check or an Employer Verification Form](#)

Oranga Tamariki - [Child Protection Policies](#)

Oranga Tamariki - [Safety Checking](#)

New Zealand College of Midwives - [Safety Checking](#)

Te Whatu Ora - Health New Zealand Enquiries:

Phone: 0800 855 066 (contact centre) *or*  
Email: [adminsupport@health.govt.nz](mailto:adminsupport@health.govt.nz)  
Subject: Maternity Services Authority Query