

Maternity services guide



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Welcome to University Hospital Southampton's maternity services

University Hospital Southampton's maternity services are based in the Princess Anne Hospital (PAH), the New Forest Birth Centre, and in children's centres spread throughout the wider community. As a centre of excellence for maternity care, we offer a comprehensive service facilitating midwifery-led care and a choice of birthplace options, including home birth through our birth centres.

The Princess Anne Hospital is also a regional centre for maternal and fetal medicine, providing multi-speciality, consultant-led care for women who have, or who develop medical problems during their pregnancy or labour. This care is provided through our early pregnancy unit (EPU), maternity day assessment unit (MDAU), maternal and fetal medicine unit, and on our labour ward.

If your baby requires extra care at birth, the Princess Anne Hospital has one of the largest regional neonatal units in the country, providing specialist

care to term and preterm babies, in a spacious and welcoming environment.

With over 5,000 women a year choosing to have their babies with us, we aim to provide high quality maternity care and this booklet provides an insight into our services and expertise, so that you can make informed choices and receive the best possible care. If you have any questions or need reassurance at any time, please do not hesitate to discuss your concerns with your midwife.

We advise you to download a copy of this booklet from our website and keep it with your antenatal care record, enabling you to refer to it throughout your pregnancy, labour and in the weeks following the birth of your baby.

Website:

www.uhs.nhs.uk/OurServices/Maternityservices

How to find us

By bus

Several local bus routes serve the Princess Anne Hospital. For more information, visit our website: www.uhs.nhs.uk/Ourhospitals/PAH/Getting-here-and-parking/PublicTransporttoPAH.aspx

You can also visit individual operators' websites for timetables and information about discounted travel:

- **First Southampton**
Telephone: **023 8022 4854** and **0870 010 6022**
Website: www.firstgroup.com/southampton
- **Bluestar**
Telephone: **023 8023 1950** or **0845 894 2469**
Website: www.bluestarbus.co.uk
- **Uni-link**
Telephone: **023 8059 5974**
Website: www.unilinkbus.co.uk

By car

The entrance to the Princess Anne Hospital is on Coxford Road. Please use the main car park, taking a ticket at the entrance barrier.

There are a small number of spaces for blue badge holders, as well as parent and child parking in the C level car park. Parking outside marked spaces may obstruct emergency traffic and your car may be clamped. Parking outside the D level entrance is reserved for ambulances.

Payment is required before you return to your car. Pay points are located within the hospital on B, D and E level. Parking prices are subject to change, although discounts, long stay and weekly tickets are available, ask a member of staff for details. For up to date information visit: www.uhs.nhs.uk/Ourhospitals/PAH/Getting-here-and-parking/ParkingatPrincessAnneHospital/Patientandvisitorparkinginformation.aspx

Useful telephone numbers

Princess Anne Hospital

Broadlands birth centre	023 8120 6012
Labour ward	023 8120 6002
Burley postnatal ward	023 8120 6030
Lyndhurst antenatal ward	023 8120 6029
Ultrasound scan department	023 8120 6046
Breastfeeding Babes	07786 267584
Early pregnancy unit	023 8120 8412
Obstetric physiotherapy	023 8120 8967

Princess Anne Hospital antenatal clinic	023 8120 6016
Bitterne Health Centre antenatal clinic	023 8042 6338
Maternity day assessment unit	023 8120 4463
Maternity information and support services	023 8120 6052
Community midwifery co-ordinator (for non-urgent messages only)	023 8120 4909 (7.30am to 5.30pm, seven days a week)

New Forest

New Forest Birth Centre	023 8074 7690
New Forest Birth Centre (labour line)	023 8074 7698

New Forest community teams (for non-urgent messages only):

Community midwifery co-ordinator	023 8120 4909 (7.30am to 5.30pm, seven days a week)
Hythe midwifery team	023 8042 3242
Lymington midwifery team	01590 663 480
Romsey midwifery team	01794 523 702
Totton midwifery team	023 8074 3234

GP services (out of hours)	0844 811 3060
Labour Line	0300 123 9001

Urgent concerns

If you have any urgent pregnancy concerns and you are **under 20 weeks** pregnant, please call your GP or **111**. You may require a referral to the early pregnancy unit.

If you are **over 20 weeks** pregnant and you have any urgent pregnancy concerns, such as your baby's movements are reduced or you have any bleeding from your vagina, please call the maternity day assessment unit on **023 8120 4463** (9am to 2.30am).

For urgent enquiries outside of this time, please call the labour ward on **023 8120 6002**.

If you think you might be in labour or your waters have broken, please call the 24-hour Labour Line on **0300 123 9001**.

If your waters have broken and have an offensive smell, or are brown or green in colour, please phone Labour Line on **0300 123 9001** immediately. You may need to be seen straight away.

Antenatal care

Antenatal care is the care you receive during your pregnancy and will include information on services available. You will be offered a series of appointments to assess the health and wellbeing of you and your baby, and to discuss any questions or concerns you may have. You will also be invited to attend antenatal classes and workshops.

Antenatal care begins from the moment your pregnancy is confirmed. You can refer yourself directly to a midwife (via the online self-referral form) or you can access maternity services through your GP following confirmation of a positive pregnancy test. Ideally this should be between six and eight weeks of pregnancy, as this enables you to receive early access to information about antenatal screening and lifestyle advice relevant to early pregnancy. This should include information about the benefits of folic acid during early pregnancy, dietary advice, a copy of the 'Screening tests for you and your baby' information booklet, which can be downloaded from www.uhs.nhs.uk/OurServices/Maternityservices/Your-pregnancy/Scans-and-screening-tests/Screening-tests.aspx and where appropriate, information about smoking, alcohol consumption and recreational drug use during pregnancy. For more information, please visit: www.uhs.nhs.uk/maternity

While you are pregnant, your care will be led by your named midwife, who works within a small team of midwives. Your midwife will discuss with you the number, timing and content of antenatal appointments appropriate for you, and offer you a schedule of care explaining where your appointments will take place and who will undertake your care. If you have any questions concerning the type of care offered to you, please discuss this with your midwife.

You will be given your antenatal care record booklet to keep for the duration of your pregnancy. This booklet is the only record of your antenatal care, it contains important information which if lost may affect your care. Please carry your records with you at all times and bring them to every antenatal appointment with your GP, midwife and obstetrician (a doctor who specialises in the care of pregnant women). Remember to take them with you if you go on holiday. Once you have had your baby, these notes will be filed as part of your medical records.

If you change your name, address, telephone number (including mobile number) or GP during your pregnancy, please let your midwife know as soon as possible, so that your records can be updated.

Booking appointment

Your initial appointment with your midwife is known as the booking appointment. Please allow one to two hours for your appointment and consider making childcare arrangements for your other children, if appropriate.

It is important to discuss the location of your appointment with your midwife before it is arranged to make sure it is a mutually convenient setting where you feel able to discuss sensitive issues.

Your booking appointment aims to answer many of the questions you will have about your pregnancy. You may have lots of things you wish to ask, and it is advisable to write your questions down, so you don't forget.

Your midwife will also ask you and your partner a series of routine questions. This allows your midwife to plan your care in a way which meets your individual needs and requirements.

Your midwife will discuss:

Your current health and wellbeing

- Details of any current or previous illnesses and operations, as this may influence the care planned for you.
- Please ensure your midwife is aware of any medicines you may be taking.
- This is also an opportunity to discuss with your midwife how you are feeling emotionally, as your midwife will ask you about your mental health and wellbeing.
- Blood and urine samples may be taken, and your blood pressure will be checked. The reasons for this are explained more fully in your antenatal care record. However, if you have any questions or concerns, please ask your midwife.

Previous pregnancies or miscarriages

- It is important to tell your midwife if there were any complications during a previous pregnancy or birth, as this may influence the care you receive during this pregnancy.

Your social circumstances and living arrangements

- Discussing your social circumstances and living arrangements will ensure you have the opportunity

to find out what rights and benefits you are entitled to and answer any questions you may have.

- This is also an opportunity to discuss your circumstances with your midwife if you are alone or feel unsupported during this pregnancy, as your midwife will be able to discuss additional support available to you. It is also important that your midwife is aware if your relationship is problematic or you feel you are in a vulnerable situation. Your midwife will ask every woman a series of questions about domestic violence and abuse, whether past or present, and refer you for additional support if appropriate. More information about the support available to you can be found on page 14.
- Your midwife will also discuss lifestyle factors that affect the health and wellbeing of you and your baby, such as smoking, recreational drug use and alcohol consumption.

Your partner's health and social circumstances

- An awareness of your partner's health and social circumstances is also important, as this will allow your midwife to plan the right care for you and your baby.
- Pregnancy brings changes to your relationship, and this appointment will also provide your partner with the opportunity to find out more about how to support you, ask any questions and seek relevant advice.

Dietary advice relevant to early pregnancy

Eating a balanced diet will ensure you have all the nutrients you and your baby need. However, your midwife will ensure you are aware of the foods you are advised to avoid, some of which may pose a risk to your baby's health. You will also be given details of the additional vitamin supplements you may require.

It is important to ensure you manage your weight throughout pregnancy. Your midwife will offer to weigh you at regular intervals throughout your pregnancy. Research suggests that if your BMI is 25 to 30, then a healthy weight gain in pregnancy is about 7 to 11kg (15 to 25 pounds). If your BMI is over 30 at the start of your pregnancy, your midwife will advise you to limit your weight gain to less than 10kg (22 pounds) throughout your pregnancy. It is possible for you to keep your weight gain to a minimum by making healthy changes to your diet and increasing

your level of activity. Please do not try to lose weight through extreme dieting, as this may harm the health of your unborn baby.

However, putting on too much weight can affect your health, and increase the likelihood of complications in your pregnancy and during birth. The food you eat during your pregnancy can influence your child's health later in life. Your midwife will be able to discuss optimal weight gain with you, and where appropriate, provide additional support if you are underweight or overweight. You may also be advised to read the 'Raised body mass index (BMI) in pregnancy, labour and birth' factsheet. This is available to download from: www.uhs.nhs.uk/maternity

During your booking appointment, your midwife will discuss antenatal workshops with you. These include the 'health in pregnancy' workshop. Attending this workshop early in your pregnancy will provide you with detailed information about healthy eating and exercise in pregnancy. The workshop discusses optimal weight gain and how to manage your weight if you have a raised BMI. There is also an opportunity for you to receive a free referral to weight management services if appropriate. These are available free of charge within Southampton and Hampshire. Seeking their support during and after your pregnancy is strongly recommended. Please contact the health in pregnancy midwife, for further information. Email: healthinpregnancymidwife@uhs.nhs.uk

Regular exercise, such as walking or swimming, is important when you are pregnant. Throughout pregnancy, you should aim for at least 30 minutes of moderate exercise every day. There are many different opportunities to exercise and remain active during your pregnancy, please discuss these with your midwife.

For further advice on what to eat and how to stay physically active during pregnancy, visit:

www.nhs.uk/start4life

Your place of birth

Your midwife will also discuss your place of birth with you. You do not have to decide straightaway, as it is important to take your time, consider the options available and to choose the right place for you. Please visit: www.uhs.nhs.uk/maternity for more information about your birth place options and to download the booklet 'Choosing where to have your baby'. A number of birthplace apps are also available. Please ask your midwife for details.

If your pregnancy is considered to be at low risk of developing complications, your antenatal care will be provided by a team of midwives in your local area together with your GP. If you have a higher risk of developing complications, you will be offered care led by a consultant obstetrician, who will share your care with your midwife and GP. Should complications arise during your pregnancy, you will also be offered an appointment with the consultant-led obstetric team.

Antenatal appointments

Depending on whom you are seeing on a particular day, the location of your appointment may vary.

Your blood pressure and urine will be checked at each appointment. The reasons for this are explained in your antenatal care record. You will need to bring a urine sample with you to every appointment.

Your baby's movements will be discussed at your 16 week antenatal appointment and the normal pattern of movement will be explained to you. Your midwife will ask you about your baby's movements at every subsequent appointment. Your midwife will also explain what to do if you have any concerns

about your baby's movements. Further information is available in your antenatal care record.

Information about what to expect at each appointment is also included in your antenatal care record. Please read it before your appointment and take the opportunity to mention any concerns you may have had since your last visit. This is also an opportunity to find out about matters of interest to you.

If you cannot keep an appointment, please help us by calling your midwife or the antenatal clinic as soon as possible to rearrange your appointment.

Antenatal care schedule for first time mothers

Gestation	Aim of consultation	Clinician
Initial pregnancy contact	<p>This may be a discussion with your GP or a phone call with a midwife from our maternity triage team (if you accessed maternity care directly). The early pregnancy screening tests and scans available to you and your baby will be discussed with you. You will also be advised to read the booklet 'Screening tests for you and your baby'. This is available to download from: www.uhs.nhs.uk/OurServices/Maternityservices/Your-pregnancy/Scans-and-screening-tests/Screening-tests.aspx</p> <p>This is also an opportunity to discuss any questions you may have relating to diet, exercise or smoking cessation, or any other concerns you may have about your physical or emotional wellbeing relevant to early pregnancy.</p> <p>Arrangements will also be made for your booking appointment and ongoing maternity care. If you have submitted an online self-referral form, one of our triage midwives will liaise with your GP, notifying them of your pregnancy and ensuring relevant medical history is shared. This will enable your midwife to plan your care according to your needs.</p>	Midwife or GP
8 to 10 weeks booking appointment	<p>Your booking appointment is an opportunity to meet your midwife and discuss your current health and wellbeing, as well as your plans for pregnancy and birth. This information will be used to determine whether or not you need to see an obstetrician during your pregnancy and if appropriate, appointments will be made. The screening information you received earlier in your pregnancy will be discussed and any necessary blood tests performed. Your blood pressure will be checked and you will be asked to provide a urine specimen.</p> <p>An appointment for a glucose tolerance test (GTT) will be made if an increased likelihood of you developing gestational diabetes (GDM) is identified at your booking appointment. Gestational diabetes can affect the wellbeing of you and your baby during pregnancy, labour and birth. However, the risks can be reduced if gestational diabetes is detected and well managed. Your midwife will discuss the timing of this appointment with you.</p> <p>You will also be given information about antenatal classes and workshops.</p>	Midwife
11 to 14+1 weeks	Dating scan and combined screening for Down's, Edward's and Patau's syndrome, if requested.	Ultrasound
14+2 to 20 weeks	Quadruple testing (if earlier combined screening is not possible).	Ultrasound
16 weeks	<p>This is an opportunity to discuss your screening results and expected due date with your midwife. If your blood group is RhD negative, you will be offered a further blood test that will tell you if your baby is RhD positive or negative.</p> <p>Your baby's movements and your suitability for midwifery-led care in labour will also be discussed. You will be reminded to book antenatal classes if you haven't already done so.</p>	Midwife

Gestation	Aim of consultation	Clinician
19 to 21 weeks	Anomaly scan. Vaccination for whooping cough and flu. Please see page 12 for more information.	Ultrasound
25 weeks	Your midwife will discuss your anomaly scan results with you. The importance of recognising the pattern of your baby's movements and when and where to self-refer if you are concerned will also be discussed. This is also an opportunity to discuss your plans for feeding your baby. You will receive your Mat B1 form.	Midwife
28 weeks	During this appointment you will be offered a blood test to check your haemoglobin (iron) levels and if you have any antibodies (foreign proteins) in your blood. Your weight will be recorded, and you will have your GTT if this has already been arranged with you.	Midwife
30 weeks	If your blood group is RhD negative, and either fetal blood group testing has shown your baby is RhD positive or you have not had this test, you will be offered an Anti D injection when you are 30 weeks pregnant. This is because you may develop antibodies to your baby's red blood cells. This can be prevented through Anti D injections.	Midwife or clinic
31 weeks	During this appointment your blood test results will be discussed.	Midwife or GP
34 weeks	Antenatal appointment.	Midwife or GP
36 weeks	During this appointment you will be able to discuss your plans for birth, including signs of labour and pain relief. You will be given information about vitamin K for your baby. If you are taking iron supplements, your haemoglobin levels may be rechecked. Your weight will also be recorded.	Midwife
38 weeks	<p>This will be any opportunity to confirm your birth plans and answer any questions you may have.</p> <p>Your midwife will also discuss induction of labour with you. National guidance recommends induction of labour to avoid the risks of a prolonged pregnancy (pregnancy lasting beyond 42 weeks). It is not possible to reliably predict which babies are at increased risk, so the Department of Health recommends induction of labour to all women between 41 and 42 weeks of pregnancy (usually when you are 12 days over your due date). You are advised to download and read the booklet 'Induction of labour' for more information. This is available to download from: www.uhs.nhs.uk/maternity</p>	Midwife or GP
40 weeks	You will be offered a membrane sweep, an aromatherapy massage and the opportunity to discuss induction. Please read the booklet 'Induction of labour' for more information.	Midwife
40+7 weeks	You will be offered another membrane sweep and an appointment for induction when you are 40+12 weeks. Your birth plans will be discussed.	Midwife

Antenatal care schedule for women who have had a baby before*

Gestation	Aim of consultation	Clinician
Initial pregnancy contact	<p>This may be a discussion with your GP or a phone call with a midwife from our maternity triage team (if you accessed maternity care directly). The early pregnancy screening tests and scans available to you and your baby will be discussed with you. You will also be advised to read the booklet 'Screening tests for you and your baby'. This is available to download from: www.uhs.nhs.uk/OurServices/Maternityservices/Your-pregnancy/Scans-and-screening-tests/Screening-tests.aspx</p> <p>This is also an opportunity to discuss any questions you may have relating to diet, exercise or smoking cessation, or any other concerns you may have about your physical or emotional wellbeing relevant to early pregnancy.</p> <p>Arrangements will also be made for your booking appointment and ongoing maternity care. If you have submitted an online self-referral form, one of our triage midwives will liaise with your GP, notifying them of your pregnancy and ensuring relevant medical history is shared. This will enable your midwife to plan your care according to your needs.</p>	Midwife or GP
8 to 10 weeks booking appointment	<p>Your booking appointment is an opportunity to meet your midwife and discuss your current health and wellbeing, as well as your plans for pregnancy and birth. This information will be used to determine whether or not you need to see an obstetrician during your pregnancy and if appropriate, appointments will be made. The screening information you received earlier in your pregnancy will be discussed and any necessary blood tests performed. Your blood pressure will be checked and you will be asked to provide a urine specimen.</p> <p>An appointment for a glucose tolerance test (GTT) will be made if an increased likelihood of you developing gestational diabetes (GDM) is identified at your booking appointment. Gestational diabetes can affect the wellbeing of you and your baby during pregnancy, labour and birth. However, the risks can be reduced if gestational diabetes is detected and well managed. Your midwife will discuss the timing of this appointment with you.</p> <p>You will also be given information about antenatal classes and workshops.</p>	Midwife
11 to 14+1 weeks	Dating scan and combined screening for Down's, Edward's and Patau's syndrome, if requested.	Ultrasound
14+2 to 20 weeks	Quadruple testing (if earlier combined screening is not possible).	Ultrasound
16 weeks	<p>This is an opportunity to discuss your screening results and expected due date with your midwife. If your blood group is RhD negative, you will be offered a further blood test that will tell you if your baby is RhD positive or negative.</p> <p>The importance of recognising the pattern of your baby's movements and when and where to self-refer if you are concerned will also be discussed.</p> <p>You will be reminded to book antenatal classes if you haven't already done so. Your suitability for midwifery-led care in labour will also be discussed.</p>	Midwife

Gestation	Aim of consultation	Clinician
19 to 21 weeks	Anomaly scan. Vaccination for whooping cough and flu. Please see page 12 for more information.	Ultrasound
28 weeks	<p>Your midwife will discuss your anomaly scan results with you. This is also an opportunity to discuss your plans for feeding your baby. You will receive your Mat B1 form.</p> <p>During this appointment you will be offered a blood test to check your haemoglobin (iron) levels and if you have any antibodies (foreign proteins) in your blood. Your weight will be recorded, and you will have your GTT if this has already been arranged with you.</p>	Midwife
30 weeks	If your blood group is RhD negative, and either fetal blood group testing has shown your baby is RhD positive or you have not had this test, you will be offered an Anti D injection when you are 30 weeks pregnant. This is because you may develop antibodies to your baby's red blood cells. This can be prevented through Anti D injections.	Midwife or clinic
34 weeks	Antenatal appointment. During this appointment your blood test results will be discussed.	Midwife or GP
36 weeks	During this appointment you will be able to discuss your plans for birth, including signs of labour and pain relief. You will be given information about vitamin K for your baby. If you are taking iron supplements, your haemoglobin levels may be rechecked. Your weight will also be recorded.	Midwife
38 weeks	This will be an opportunity to confirm your birth plans and answer any questions you may have.	Midwife or GP
40 weeks	Your midwife will discuss induction of labour with you. National guidance recommends induction of labour to avoid the risks of a prolonged pregnancy (pregnancy lasting beyond 42 weeks). It is not possible to reliably predict which babies are at increased risk, so the Department of Health recommends induction of labour to all women between 41 and 42 weeks of pregnancy (usually when you are 12 days over your due date). You are advised to read the booklet 'Induction of labour' for more information. This is available to download from: www.uhs.nhs.uk/maternity	Midwife
40+7 weeks	You will be offered a membrane sweep and an appointment for induction when you are 40+12 weeks. Please read the booklet 'Induction of labour' for more information. Your birth plans will also be discussed.	Midwife

*If you have had a previous caesarean section, your appointment schedule will be similar to the schedule for women expecting their first baby.

their pregnancy. For this reason, your midwife will expect to see you on your own at least once during your pregnancy.

It is important to ensure women have the opportunity to discuss any issues in complete confidence during

Antenatal screening tests

There are a variety of screening tests that may be offered to you during your pregnancy. Choosing to have a screening test is a personal choice and one which only you can make. Please discuss each test you are offered with your midwife, as this will allow you to make an informed decision based on your own individual circumstances.

Your midwife will respect your decision not to have any of the recommended tests.

However, screening for HIV, hepatitis B and syphilis is strongly recommended due to the implications of an untreated infection to your baby. If you decide not to be tested, you will be offered an appointment with our specialist screening team and re-offered screening later in your pregnancy (ideally by 20 weeks) in accordance with national recommendations.

Please discuss these tests with your midwife if your circumstances change or you are worried.

For more information about the screening tests offered to you, please read the 'Screening tests for you and your baby' booklet. This booklet gives you information about some of the tests you will be offered during your pregnancy and after your baby is born. It is available to download from our website: www.uhs.nhs.uk/OurServices/Maternityservices/Your-pregnancy/Scans-and-screening-tests/Screening-tests.aspx

Alternatively, you may wish to download the 'Wessex Healthier Together' app.

If you have any questions about antenatal screening, please contact the antenatal screening team on **023 8120 6027**.

Vaccinations offered during pregnancy

Your midwife will discuss the flu and whooping cough vaccine with you during your booking appointment. These vaccinations are strongly recommended and protect both you and your baby. You are advised to read the information in this booklet as this will enable you to make an informed decision.

Flu vaccine

When you are pregnant, your body naturally weakens your immune system to ensure the pregnancy is successful. This increases your risk of catching infections, such as flu. Flu is a highly infectious illness that is spread rapidly through coughs and sneezes.

You will be offered the flu vaccine during your pregnancy as you and your baby are at greater risk of harmful complications caused by flu, both during pregnancy and after birth, such as pneumonia, hospitalisation, premature labour, miscarriage and stillbirth.

The flu vaccine is available from the end of September until the end of March, and is the most

effective way of protecting you and your baby. It is not possible for the vaccine to give you flu because it is not a live vaccine. It is safe to have the flu vaccine at any time during pregnancy, but it is best to have it as early as possible, as it takes around 14 days to provide protection after vaccination. Sometimes you may need two flu vaccines if your pregnancy falls over two flu seasons. This is because the antibodies that protect you from flu decline over time and the strains of the flu virus can also change from year to year. This means the flu (and the vaccine) this year may be different from last year. For more information please visit: www.nhs.uk/conditions/pregnancy-and-baby/flu-jab-vaccine-pregnant or www.nhs.uk/vaccinations

Whooping cough vaccine

Whooping cough is a very infectious disease of the lungs, which is more serious in babies under the age of one. This is because their immune systems are not fully developed and they are less able to fight the infection. As a consequence, it can lead to pneumonia, permanent brain damage and occasionally death.

A sharp rise in the number of cases of whooping cough, particularly among babies who are too young to be vaccinated, led to the whooping cough vaccine being offered to expectant mothers from 2012.

The whooping cough vaccine is not a live vaccine, so it is safe to receive this vaccine during pregnancy. You will be offered the whooping cough vaccine from 16 weeks of pregnancy. The antibodies you create in response to the vaccine will pass through your placenta to your baby, which will help protect them until they are old enough to start their own vaccinations. Research shows that babies born to mothers who received the vaccine in pregnancy are 91% less likely to have whooping cough in the first few weeks of life.

The vaccine also protects your baby against diphtheria, tetanus and polio. For more information

please visit: www.nhs.uk/conditions/pregnancy-and-baby or www.nhs.uk/vaccinations

It is possible to have both vaccines at the same time. However, it is important not to delay receiving them in order to do this.

The Princess Anne Hospital runs a vaccination clinic within the outpatients department on E level. If you are coming to the outpatients department for a scan, the vaccination team will aim to book your flu and whooping cough vaccination appointments on the same day. Your midwife may have requested these appointments as part of your booking appointment. If not, you can contact the midwifery vaccination team for advice or to book an appointment.

Telephone: **023 8120 4594**

Email: MaternityVaccinations@uhs.nhs.uk

Your emotional wellbeing

Pregnancy can be an emotional time. Hormonal changes take place in your body during pregnancy which can make you feel tired, nauseous, emotional and tearful. This is particularly common in the first three months. It is therefore important to look after your physical health and ensure you have plenty of rest. It is also important to discuss any worries, concerns and anxieties you may have. Your midwife will also discuss sources of help available to you. Some women find the 'Mindfulness for pregnancy' or 'Headspace' apps helpful.

During your pregnancy, it is also important to discuss with your midwife the many changes having a baby and becoming a parent will have on your home life, social life and relationships. Being prepared for these changes and taking time to think about the support you might find helpful after your baby is born will enable you to look after your mental health and wellbeing.

You may wish to:

- identify local activities and groups in your area. This can be a good way to meet new friends.
- think about ways in which to maintain a healthy diet and stay active. Southampton offers free swimming for pregnant women at the Quays and Bitterne leisure centre. Speak to your midwife for more information.

- identify friends or family who are willing to help with household chores, meal rotas or babysitting.
- identify someone you can trust to talk about how you feel. This may be your partner, your midwife, a close friend or a member of your family.

Some women become depressed during pregnancy and may need treatment. You are more at risk of becoming ill with a depressive illness during pregnancy if you have had concerns about your mental health or wellbeing in the past. Your midwife will discuss your emotional wellbeing with you during your antenatal appointments and ask you if you have been feeling down, depressed or anxious during your pregnancy. If you feel your mood has changed, you are feeling down most of the time or you are feeling anxious, please discuss this with your midwife or GP. If you live in Southampton, you can also refer yourself to Steps 2 Wellbeing.

Telephone: **0800 612 7000**

Website: www.steps2wellbeing.co.uk

If you live in Hampshire, you can refer yourself to iTalk.

Telephone: **023 8038 3920**

Website: www.italk.org.uk

Domestic violence and abuse

Domestic violence and abuse is common, affecting one in four women during their lifetime. Abuse may be physical, emotional, financial or sexual. It is any incident (or pattern of incidents) of controlling, coercive, threatening behaviour, violence or abuse. Pregnancy often triggers an escalation in abuse and can have long term health consequences. All women are asked about abuse during their pregnancy in order to offer support, guidance and help if they request it. Your midwife can also provide you with information about specialist agencies to help further. Please speak to your midwife if you need help of any kind. You may also find the following websites and phone numbers helpful:

- National domestic abuse: **0808 200 0247** (24-hour helpline)
- Southampton city – Pippa: **023 8091 7917** (Monday to Friday, 9.30am to 4.30pm)

Early pregnancy unit (EPU)

The early pregnancy unit (EPU) is dedicated to providing care for you and your baby up until 19 weeks and 6 days of pregnancy. If you experience abdominal pain or bleeding, or have any other concerns, your first point of contact for advice should be your midwife or GP. They will then refer you to the EPU, if appropriate.

You may refer yourself directly to the EPU for an assessment if you have had three or more consecutive

- Hampshire - Stop Domestic Abuse: **0330 016 5112**
- Forced Marriage Unit: **020 7008 0151**
- NSPCC – female genital mutilation helpline: **0800 028 3550**

Domestic abuse affects men too. Respect is a domestic abuse organisation who work with perpetrators, male victims and young people in heterosexual or same-sex relationships. For more information, please visit: www.respect.uk.net

The Men's Advice Line is a confidential helpline for male victims of domestic abuse and those supporting them. Visit: www.mensadviceline.org.uk or phone **0808 801 0327** (Monday to Friday, 9am to 5pm (8pm on Wednesday)).

miscarriages, a previous ectopic pregnancy or a previous diagnosis of a molar pregnancy. The timing of your appointment will depend upon the severity of your symptoms, but it will be no later than 48 hours after your referral is received. You are welcome to call the EPU for advice on **023 8120 8412**.

The EPU is situated on D level at the Princess Anne Hospital and is open Monday to Friday from 8.30am to 7pm, and Saturday from 8am to 6.30pm.

Maternity information and support services

Parent information evening

During early pregnancy, you are invited to attend an open evening for expectant parents. This is a one-off exhibition and presentation, offering early pregnancy advice and information. It is held at 7pm on the first Tuesday of the following months: February, April, June, August, October and December in the outpatients department, E level, Princess Anne Hospital. There is no need to book in advance, just turn up. You are welcome to bring your partner, a relative or a friend.

Antenatal workshops

During your booking appointment you will also receive an application form for our antenatal classes and workshops, which are held during the day and evenings.

- **Preparation for birth and beyond (PBB) workshops**

PBB is a series of workshops to help you prepare for labour, giving birth and meeting your baby. You can choose to complete the workshops over a four or five week period, or as a one day course.

- **Infant feeding workshops**

You and your partner are invited to a workshop where you can learn practical skills to prepare for breastfeeding. The value of breastfeeding as protection, comfort and food will be discussed. You will also learn good positions to ensure a good latch, how to hand express, responsive feeding and safe sleep.

- **Maternity-led and independent workshops**

In addition to the PBB workshops, there are a number of separate, individual workshops available to you and your partner. Please read your maternity information programme for more information. You are welcome to select the PBB workshop and any of the extra workshops that are of particular interest to you.

While these classes are arranged for later in your pregnancy, places are limited and fill up very quickly. Workshops are booked on a first-come, first-served basis. You are therefore advised to complete your booking form as early in your pregnancy as possible. Bookings for workshops can only be made by completing the maternity information programme booking form. We do not take telephone bookings. Please send or bring in your completed form to the address on the booking form. If you did not receive a copy of this form as part of your booking appointment, please speak to your midwife or download a copy from: www.uhs.nhs.uk/maternity

If you have any questions, please telephone maternity information and support services (MISS) on **023 8120 6052** (8am to 4pm). Please leave a message on the answer machine if the office is not open.

If for any reason you wish to cancel your place, please call MISS on **023 8120 6052** as soon as possible, so that someone from our waiting list can take your place.

If you live outside the Southampton city area, classes are usually organised by your community midwife.

Use of seatbelts in pregnancy

Pregnant women should wear a three-point seatbelt throughout their pregnancy. The lap strap should be placed as low as possible beneath the bump, lying across the thighs, with the diagonal shoulder strap over the bump, lying between the breasts and

going over the shoulder and collar bone. The seatbelt should be adjusted to fit as snugly as possible and, if necessary, the seat should be adjusted to enable the seatbelt to be worn correctly.

Obstetric antenatal clinics

Some women need to have appointments with an obstetrician during pregnancy. The obstetric team cares for women who already have medical conditions, have had a previously complex pregnancy or who develop complications during pregnancy. The obstetric team may also have medical, midwifery or nursing students working with them. A team of clinic assistants is also available to check your blood pressure and urine sample. Obstetric care is provided in partnership with your GP and local team of midwives. After your appointment, your obstetrician will write to your GP and midwife with a recommendation and plan for your care (this will have been discussed and agreed with you in your appointment). You will also receive a copy of this plan, which should be safely attached to your hand-held antenatal care record.

Your plan may include further appointments at the obstetric clinic. However, if you have been booked for obstetrician-led care and all remains well with you and

your baby, you may only be seen once at the obstetric clinic. Your midwife or GP will see you for the rest of your antenatal care and will refer you back to see the obstetrician should there be any concerns.

Obstetric antenatal clinics are located within the outpatient department on E level at the Princess Anne Hospital. Additional clinics are also held at Bitterne Health Centre (BHC) and Lymington community hospital. The location of your clinic appointment will depend upon where you live and the reason for your appointment.

Please be prepared for some delays, as sometimes women need longer than the time that was scheduled for them due to reasons beyond anyone's control. Due to the length of the appointments and possible delays at outpatient clinics, please consider making childcare arrangements for your other children, if appropriate.

Antenatal hospital admission

The majority of women do not need to be admitted to hospital before the onset of labour. However, in some cases it may be necessary to spend some time in the maternity day assessment unit or as an

inpatient on Lyndhurst ward. This stay can vary from a few hours to a number of days or weeks depending on your individual reason for admission.

Maternity day assessment unit (MDAU)

The maternity day assessment unit (MDAU) is situated within the labour ward on D level at the Princess Anne Hospital. The unit is open daily from 9am to 2.30am if you require additional tests and monitoring during your pregnancy. You will be advised to attend if you have high blood pressure, diabetes, obstetric cholestasis or if your baby is thought to be small. You can also refer yourself by telephoning **023 8120 4463** from 20 weeks of pregnancy if you have any pregnancy related concerns or if you are worried about your baby's movements. For urgent enquiries outside of this time, please call the labour ward on **023 8120 6002**.

Please bring your maternity notes with you when you come to the MDAU. The MDAU uses a triage system to determine who needs to be seen first. This means you will be seen according to your clinical need and severity of your symptoms, rather than the time of

your arrival. A midwife will assess you when you arrive and allocate you a colour depending on how urgently you need to be seen:

- **Red** means you require immediate medical attention
- **Orange** means you should be seen within the next 15 minutes
- **Yellow** means you should be seen within one hour
- **Green** means you should be seen within four hours

Please ask a member of the MDAU team if you have any questions or concerns.

Antenatal day assessment facilities are also available at the New Forest Birth Centre. If you live in this area, please phone **023 8074 7690** if you have any pregnancy related concerns or if you are worried about your baby's movements.

Lyndhurst ward

Antenatal hospital admission may be recommended for a number of reasons and will form part of a plan to assess and monitor the wellbeing of you and your baby. If you are advised to stay in hospital at any time during your pregnancy, you will be cared for by our team of obstetricians and midwives on Lyndhurst ward. The reasons for recommending admission will be explained to you and your care will be continuously reviewed by our midwives and obstetricians who will be happy to answer any questions you may have.

You may be offered screening for MRSA upon admission to the Princess Anne Hospital. This is one of a number of measures taken to reduce infection within hospitals. Please ask your midwife for more information, or if you have any questions or concerns.

There is little storage available within Lyndhurst ward for personal items. To facilitate good housekeeping and for health and safety reasons, please keep personal items to a minimum. You may find it helpful to refer to the section entitled 'Things to bring into your chosen birthplace' on page 19 of this booklet.

Obstetric physiotherapy

If you are experiencing any muscular or joint problems relating to your pregnancy, an obstetric physiotherapy service is available. This service aims to help women with a number of pregnancy related conditions including:

- back and pelvic pain
- abdominal weakness or stretching of the rectus abdominus muscles
- carpal tunnel syndrome
- bladder and continence problems

Please telephone **023 8120 8967** for advice or to arrange an appointment.

You may refer yourself to this service until your baby is ten days old. If you have concerns after this time, please speak to your GP.

You may also find the following websites helpful:

- Pelvic Obstetric and Gynaecological Physiotherapy (POGP) - pogp.csp.org.uk
- Pelvic Partnership - www.pelvicpartnership.org.uk

You may also find it useful to download the NHS Squeezy app to help with your pelvic floor exercise regime. For more information, please visit: www.nhs.uk/apps-library/squeezy

Preparation for labour and birth

When considering your labour and birth, it is essential to consider the following:

- where to have your baby
- your birth partner
- when to come to your chosen birth place
- what to bring with you
- pain relief

Choosing where to have your baby

Every woman's experience of labour and birth is unique. When deciding where to have your baby you will want to choose the most appropriate place for you.

University Hospital Southampton NHS Foundation Trust is able to offer a choice of birthplace options, including:

- Home
- Midwifery-led birth centre:
 - New Forest Birth Centre in Ashurst
 - Broadlands birth centre within the Princess Anne Hospital
- Labour ward (obstetrician-led delivery suite) within the Princess Anne Hospital

Our birth centres aim to offer a homely environment with a focus on normal birth. Birth centres are not equipped to perform medical interventions and are therefore only suitable for women with a healthy pregnancy who are expecting to have a straightforward birth. You can access a virtual tour of both Broadlands and the New Forest Birth Centre on our website at: www.uhs.nhs.uk/maternitytour

You may also wish to contact the New Forest Birth Centre on **023 8074 7690** if you have any questions or if you would like to arrange a walk-around tour.

Our labour ward provides multi-speciality, consultant-led care for women who have, or who develop,

medical problems during their pregnancy or labour, and for whom birthing in an environment with direct access to obstetricians, anaesthetists (who administer epidurals and general anaesthetic) or neonatologists (specialists in newborn care) is recommended.

You are advised to read the 'Choosing where to have your baby' booklet, which is available to download from: www.uhs.nhs.uk/maternity and provides more information about each of the birth locations. Your choice of birthplace will influence the type of care you receive, your options for pain relief and your access to medical assistance if complications

arise. If you are planning to have your baby at home or in one of our birth centres, it is essential you are aware of the reasons why transfer to the Princess Anne labour ward might be recommended and the arrangements in place should this become necessary.

The safety of you and your baby remains a priority and therefore some birthplace options may not be appropriate for you, depending on your individual circumstances. It is important to make your decisions in partnership with your birth partner and midwife, and where appropriate your obstetrician. Your midwife will be happy to answer any questions you may have.

Things to bring into your chosen birth place

If you have chosen to give birth in one of our birth centres, or you have been advised to have your baby at the Princess Anne labour ward, we recommend you have your bag packed at least six weeks before your baby is due. Two small bags are better than one large bag, as all your belongings need to be able to fit into a small locker (no belongings should be placed on the floor). This is to enable easy cleaning, which minimises the risk of infection.

You must remember to bring your antenatal notes and any medicines you are currently taking. These should be discussed with your midwife when you arrive. It is important that during your stay you only take medication prescribed for you by the hospital or your GP. If you are planning to give birth at home you might like to use the list below as a shopping checklist. However, packing a small bag in case of transfer is also recommended.

For you

- Your antenatal care records and this booklet
- Medication you have been prescribed
- Something to wear during birth
- Nightwear/dressing gown and slippers (your feet may be swollen)
- Comfortable day clothes and shoes
- Wash bag and toiletries including flannel, hairbrush, deodorant, toothbrush, toothpaste and soap
- Bath towel
- Maternity sanitary towels (maximum absorbency) and disposable knickers (you may need a size larger

- than your pre-pregnant size initially)
- Bra and breast pads
 - If you have chosen to breastfeed, please discuss the fitting of nursing bras, and the use of breast pads and nipple creams with your midwife at your 36 week antenatal appointment.
 - If you choose not to breastfeed, wearing a supportive bra and having breast pads available in case you need them is advisable.
- Packet of tissues
- Snacks, squash and energy drinks or sweets
- Pen and note pad
- Pillow (please use a coloured pillowcase)
- Entertainment for yourself, for example books, magazines and music

Do not bring in non-PAT tested electrical items, as faulty equipment may pose a fire risk. Please consider battery-operated alternatives.

For your birth partner

- Bag containing a change of clothes (including a jumper and T shirt) and toiletries
- Drinks and snacks
- Money for phone calls, meals and parking
- Camera

For your baby

- Clothes (vests, babygros, cardigan, socks and scratch mittens)
- Hat

- Disposable nappies for newborns (allow up to ten per day). The use of environmentally friendly nappies is encouraged, but due to health and safety issues and the lack of laundry facilities within the Princess Anne Hospital and the birth centres, you will need a supply of disposables during your stay.
- Cotton wool (we do not recommend baby wipes for newborns)
- Baby bath towel (preferably coloured because NHS towels are all white). Never let anyone else use your baby towel.
- If you have chosen to feed your baby with formula milk, you will need to bring with you a minimum of two starter packs (each pack contains six x 70ml bottles and six disposable teats) of your chosen milk brand. These starter packs are readily available at all major supermarkets and online. Only premade milk in the starter packs can be used. Milk cannot be made up from powder as there are no sterilising facilities in the hospital and therefore no milk can be decanted into other bottles.
- On the day you are discharged from hospital, a car seat plus a shawl or blanket for your baby should be brought in.

You are encouraged to keep your belongings to a minimum during labour and when you are on the postnatal ward. Please ask your partner or a friend to take home belongings that are no longer required and gifts that are received after your baby's birth. You are also advised to leave valuables at home. Please make sure that you do not leave your purse or other valuables unattended in your room.

Please do not wear jewellery, nail polish or body piercings while you are in labour. If an unplanned

caesarean section is necessary, or you need to transfer to the operating theatre for any other reason, your nail polish will need to be removed. You will also need to take off any jewellery, apart from one plain ring, such as a wedding ring, which will be taped in place.

If your labour is assisted in any way (including having a caesarean) or if you choose to use remifentanyl or an epidural in labour, a finger probe or 'pulse oximeter' is placed on your finger to measure the level of oxygen in your blood. Nail varnish prevents the pulse oximeter from providing an accurate measurement. It also prevents accurate observation of your nail bed which is one of the best places to identify low oxygen levels. Removing jewellery, body piercings, acrylic and shellac nails takes valuable time when you are preparing to go to theatre and the likelihood of jewellery being lost when it is taken off in a hurry is increased.

Laundry facilities are not available. You are advised to bring sufficient clothing for one to two days and to ask your partner or a friend to take home clothes requiring laundering and bring in clean ones as required.

Mobile phones are not welcome on labour ward as sensitive equipment may be in use. Phones can be a cause of noise and nuisance to other patients. Please be considerate when using your phone on the postnatal ward. Please be aware that the charging of non-PAT tested equipment is prohibited.

There are shops in the entrance foyer of Southampton General Hospital where your visitors may buy items on your behalf, which are open Monday to Friday, from 7.30am to 8.45pm, and on Saturday and Sunday from 9am to 6.45pm.

When labour starts

Every woman's experience of labour is different. It is important to remember that it is a normal process. The early stage of labour prepares the uterus (womb), baby and cervix (neck of the womb) for birth. This may take hours or even days. It may stop altogether and start again later or another day. It's important to think about how you are going to look after yourself during early labour and make plans for somebody to support you during this time. Staying within the comfort of your own home until your labour is established can increase your chances of a normal birth. Please refer to the 'What to expect in the early stage of labour' factsheet for advice on how to cope with the early stages of labour. This is available from: www.uhs.nhs.uk/maternity

If you would like further advice or you think you are ready to transfer from home to your chosen place of birth, please call the dedicated Labour Line on **0300 123 9001** and speak to a midwife.

Labour Line midwives are available to listen to you as your labour starts to establish, offering you support and encouragement together with practical tips and suggestions. Arrangements to call you back or for a midwife to visit you at home may also be made if appropriate.

You will need to arrange your own transport to your chosen place of birth. A car or taxi can bring you right to the door of the Princess Anne Hospital, but this is also the area for ambulances. Please make sure your driver moves away as soon as possible. When you come into the Princess Anne Hospital, come to D level for the labour ward or E level for the Broadlands birth centre, depending on where you are planning to give birth. You will need to come through D level to access Broadlands birth centre during the night.

When your waters break

Your unborn baby develops and grows inside a bag of fluid called the amniotic sac. When it's time for your baby to be born, the sac breaks and the amniotic fluid drains out through your vagina. This is known as your 'waters breaking'. Most women's waters break during labour, but it can also happen before labour starts. If your waters break before your labour starts, you may feel a slow trickle of fluid from your vagina or a sudden gush that you cannot control, or you may just feel damp. If you think your waters may have broken, wear a maternity sanitary towel (not a tampon) and make a note of the colour and amount of fluid leaking from your vagina. Call Labour Line on **0300 123 9001** for advice from our team of midwives. A booklet called 'If your waters break before labour starts' is available

from your midwife or you can download a copy from: www.uhs.nhs.uk/maternity

If you have any questions or concerns, please do not hesitate to call Labour Line on **0300 123 9001** and speak to a midwife for advice.

Please speak to a midwife **urgently** if you are concerned about any of the following:

- you have any bleeding from your vagina
- your waters break and appear blood-stained or greenish-brown in colour
- you have any severe abdominal pain that is not related to your contractions
- you are concerned about your baby's movements

Pain relief in labour

Most women use a variety of methods to help them cope with pain during labour, and you are advised to discuss the advantages and disadvantages of the methods available with your midwife before you are in labour, so that you are able to make an informed decision about what might be right for you. Written information about water birth and the factsheet 'Epidurals and remifentanyl explained' is available to download from: www.uhs.nhs.uk/maternity

You may also choose to download the material available on the obstetric anaesthetist's association website: www.labourpains.com

Attending an antenatal course is also recommended, as this will provide you with the opportunity to ask any questions you may have. The availability of pain relief options depends on where you choose to give birth. This is explained in further detail in the 'Choosing where to have your baby' booklet.

Induction of labour

Most labours start by themselves. However, your obstetrician may recommend induction of labour to protect the health of you or your baby. This may be due to diabetes, high blood pressure or poor growth of your baby, among other reasons. Your obstetrician will discuss this with you. National guidance also recommends induction of labour to avoid the risks associated with a prolonged pregnancy (pregnancy lasting beyond 42 weeks). These risks include a small but significant increase in the likelihood of your baby needing help with their breathing at birth,

your baby needing care in the neonatal unit, stillbirth and neonatal (baby) death. It is not possible to reliably predict which babies are at increased risk, so the Department of Health recommends induction of labour to all women between 41 and 42 weeks of pregnancy (usually when you are 12 days over your due date). These risks and the process of induction are discussed in the 'Induction of labour' booklet, which is available to download from: www.uhs.nhs.uk/maternity

Partners and visitors

Wherever you plan to give birth, you are advised to arrange a birth partner to be with you to support and encourage you during your labour. This may be your partner, a relative or a friend. You may wish to include their contact numbers on your birth plan and keep it with your antenatal care record.

The contribution made by birth partners and the physical and emotional support they are able to offer you during labour and birth is recognised as invaluable. However, we ask that you limit your birth partners to two people maximum and respect our restrictions on visiting hours, so that

your privacy, dignity and security can be maintained at all times.

Please ask friends and relatives not to ring the birth centres or labour ward while you are in labour, as it is not possible to give out information over the phone in order to protect your confidentiality. This also prevents calls from other women in labour from being answered.

There is no visiting allowed on the labour ward, apart from birth partners. Please ask your visitors

to wait until you have been moved to one of the postnatal wards.

It is also important that both you and your visitors are aware of the occasional restrictions placed upon visiting when infectious illnesses

such as flu and norovirus are highly prevalent within the community. During these outbreaks, protecting the wellbeing of mothers and babies, who are both vulnerable to infection is clearly our priority and visiting is restricted to one birth

Your care after your baby is born (postnatal care)

The wellbeing of you and your baby will determine the length of time you stay at the Princess Anne Hospital or at the New Forest Birth Centre.

Decisions about your postnatal care do not need to be made before you have your baby, as your plans may change. However, the facilities available vary according to your chosen birth location. You may therefore wish to discuss your options with your midwife at your 36 week antenatal appointment.

It is essential to ensure you receive appropriate support when you are establishing feeding and that you receive adequate rest. Some mothers go home within a few hours of giving birth, but most prefer to wait until their baby is 12 to 48 hours old. You may wish to go home shortly after you have had your baby, or you may wish to transfer to one of the birth centres for additional support. This is only advisable when both you and your baby are well, so you may wish to discuss appropriate timing with your midwife after you have had your baby.

If you do not give birth at the New Forest Birth Centre, you may choose to transfer there for postnatal care and feeding support as soon as you and your baby are well enough to do so. It will be necessary for you to ensure you have an infant car seat and the transport available to transfer.

Postnatal facilities at the Princess Anne Hospital

The postnatal wards are located on Burley (and occasionally Lyndhurst) ward on F level and within Broadlands birth centre (E level). You will be advised to stay on Burley or Lyndhurst ward if your care is obstetrician-led or if your baby is receiving treatment. Once your care becomes midwifery-led, you may be transferred to Broadlands birth centre, or you may choose to go to the New Forest Birth Centre or home.

The hospital and birth centres operate a rooming-in policy, which means your baby remains with you at all times unless concerns about their wellbeing require their admission to the neonatal unit, in which case you and your partner will be able spend time with your baby there. Should this occur, or if such an admission is planned, further information about these facilities will be given to you.

Staying on Broadlands after you have your baby

You may wish to stay for additional support after you have had your baby, or go home directly from one of our birthing rooms.

Broadlands is a postnatal ward for women and babies who have had no complications and aims to provide a comfortable restful environment. If you and your baby are both well and comfortable, you will not be disturbed overnight, but please do call for assistance whenever you need to.

During your stay on Broadlands, you will receive support from a team of midwives and maternity support workers. You are also likely to be cared for by student midwives and may meet hospital volunteers. The newborn hearing screening team will also approach you to explain and perform your baby's hearing test.

Your baby will also be offered a newborn and infant physical examination (NIPE) by a paediatric doctor, advanced neonatal nurse practitioner or specialist midwife. This takes place on Burley ward (F level), and you will be seen by a nursery nurse who will give you an appointment time. You will need to ask for your hospital notes from the midwife to take with you. Please refer to page 26 for more information.

If you choose to have your baby at home or at the New Forest Birth Centre, or you go home from the

Princess Anne within six hours of birth, arrangements will be made for this examination to be performed in the community.

Staying on Burley ward after you have had your baby

Each midwife may be caring for up to nine mothers and babies. The team on Burley ward also includes student midwives, maternity care assistants and nursery nurses. If you are not confident in changing, bathing or feeding your baby, please do not hesitate to ask any member of the team for assistance.

A paediatric doctor, advanced neonatal nurse practitioner or specialist midwife will visit the ward every day to perform newborn medical examinations. The newborn hearing screening team will also approach you to explain and perform your baby's hearing test.

A guide to the normal ward routine

7.30am	Change over between day and night staff
7.30am to 8.30am	Buffet-style breakfast to be eaten in Room 14 on Broadlands
8am to 9.30am	Breakfast served at the bedside and doctors ward round on Burley and Lyndhurst
9am to 9pm	Open visiting hours
10am	Mid-morning drink
12 noon	Lunch
1pm to 3pm	Change over between morning and evening staff
6pm	Supper
8pm to 8.30pm	Change over between day and night staff
10.15pm	Settle down for the night

Medications are usually offered on Broadlands at 8am and 10pm, and on Burley ward at 8am, 1pm, 5pm and 10pm. It is helpful if you can be near your bedside for the doctor's ward round, medication times and at mealtimes. You may request medication at any time and a midwife will be happy to advise you. You may also choose to be responsible for storing and taking your own medication at the times it is prescribed. This is known as self-medication. You may find this particularly beneficial if you

usually take medication regularly at home. You will be provided with a locker for safe storage and additional medication if required. This is not appropriate for every woman. Please discuss this with your midwife if you think this may be appropriate for you.

A menu choice is offered for all main meals. If you have special food preferences, or you wish to have a special diet for a religious or cultural reason, please ask a member of the ward team to arrange this for you. There is a dining area in Room 14 on Broadlands where meals are served.

The Princess Anne Hospital has a café on E level which serves hot and cold snacks. You are advised to visit www.uhs.uk and click on 'Shops and facilities at Princess Anne Hospital' for up to date information about opening times. There are also vending machines on D level near the main entrance. There are also shops and restaurants located within Southampton General Hospital. A vending machine selling essential toiletries is located within the café on E level and a pharmacy is located within the main entrance of Southampton General Hospital.

Your visitors

General visiting times are between 9am and 9pm. We ask that there should be no more than three visitors at a time (unless they are your children). We also request that no children under the age of three visit, other than your own and your partner's.

There is a visitors' toilet in the corridor opposite the main ward door on both Broadlands and Burley.

Visitors (including your children) should not come to see you or your baby if they have a cough, cold, sickness, diarrhoea or any other infection. It is important not to expose new babies to any risk of infection.

To help prevent infection, your visitors are asked to clean their hands with alcohol gel before, during, and after visiting. This is provided at the entrances to all wards. Visitors should not sit or lie on your bed, as this can spread infection.

While an open visiting policy allows your visitors greater flexibility, please remember it is important for you to have quiet time with your baby, rest and seek advice about your wellbeing.

Staying at the New Forest Birth Centre after you have had your baby

You may choose to return home after you have had your baby, or you may wish to stay and receive postnatal support from our team of midwives and maternity support workers.

Facilities include:

- three single rooms and one four bedded room.
- a garden that can be used by mothers and their visitors.
- opportunities for new parents to eat together in our 'Sunflower' dining room. Partners are able to order meals for a small charge.
- open visiting for partners and siblings. Please refer to the birth centre tour on the hospital website for more details about visiting hours and other housekeeping arrangements.
- opportunities for breastfeeding support and parent education.
- free and easy, accessible parking.

Feeding your baby

Skin-to-skin

The more time you spend with your baby, the quicker you will learn each other's signs and signals. Holding your baby against your skin straight after birth will calm them, steady their breathing, keep them warm and encourage them to breastfeed. It is advisable to have uninterrupted skin-to-skin contact until after your baby has had their first feed as babies are awake and eager to feed in the first hour after birth. Your midwife will be there to support you and ensure you are relaxed, comfortable and not rushed. All women are advised to spend time having skin-to-skin contact with their baby even if they have chosen not to breastfeed, as there are many benefits for both mother and baby. Skin-to-skin contact with your baby doesn't have to be restricted to the first hour after birth. Whenever you spend skin-to-skin time with your baby, the hormones responsible for bonding and milk production will increase. This will encourage your milk to flow ready for a feed.

Single rooms and facilities for your partner to stay overnight

There are limited facilities for partners to stay overnight after the birth of your baby. However, single rooms are available both at the New Forest Birth Centre and the Princess Anne Hospital. They are primarily used by mothers who require additional medical attention for themselves or their baby. However, should you wish to use a single room, they are also available as amenity beds. You may request one, but please note that there is a charge, and they are subject to availability. Details are available from your midwife.

If your partner or a nominated person is staying overnight to provide physical and psychological support to you and your baby, you will be asked to sign and adhere to our code of conduct. This is to ensure the security, privacy and dignity of all women and their babies is respected at all times.

Breastfeeding

The way you feed your baby is one of the most important decisions that you will make as a parent. Breastfeeding makes a real difference to your health and your baby's health. Breastmilk is the perfect milk for a baby. It is balanced to suit their needs and protects them against ear infections, chest infections and tummy bugs. It may also protect against allergies and diabetes, and reduce the risk of cot death (sudden infant death syndrome). Breast milk is easily digested which is why breastfed babies feed frequently. For mothers who breastfeed, there is a reduced risk of pre-menopausal breast cancer, ovarian cancer and hip fractures due to osteoporosis in later life. It will also help mothers to lose weight. It may take practice and support to get breastfeeding off to a good start, but almost all women who want to breastfeed are able to do so. The Department of Health recommends exclusive breastfeeding for the first six months of a baby's life. You are also encouraged to continue breastfeeding while weaning your baby onto solid foods from the age of six months.

Our breastfeeding support group, Breastfeeding Babes, is run by a lactation consultant (expert in breastfeeding), and a small team of midwives and support workers. It is located on Lyndhurst ward, F level at the Princess Anne Hospital and is open Monday to Friday, 10am to 1pm. Please visit Breastfeeding Babes during your stay, or call **07786 267584** for advice when you are at home.

Information about our breastfeeding support groups in the community can be downloaded from: www.uhs.nhs.uk/maternity. All these groups are free. You will meet other pregnant and breastfeeding mums, and local breastfeeding counsellors who will be there to support you. Online support is also available if you are not able to come to the groups.

Formula feeding

Before you make the decision to feed your baby with formula, you should be aware that:

- formula-fed babies are more likely to suffer from diarrhoea, vomiting, coughs, colds, and other illnesses and infections
- there is a cost involved in formula feeding
- errors while sterilising equipment and making feeds can affect your baby's health

If you have been advised to offer your baby formula milk for medical reasons or choose not to breastfeed, please speak to your midwife about 'paced bottle feeding', responsive feeding and safe sterilisation techniques. More information is also available from: www.firststepsnutrition.org

If you have chosen to formula feed, you will need to bring with you a minimum of two starter packs (each pack contains six x 70ml bottles and six disposable teats) of your chosen milk brand (the Department of Health does not recommend any particular formula milk). These starter packs are readily available at all major supermarkets and online. Only premade milk in the starter packs can be used. Milk cannot be made up from powder as there are no sterilising facilities in the hospital and therefore no milk can be decanted into other bottles.

Women using the New Forest Birth Centre are asked to provide their own bottles, teats and milk powder if they are planning to formula feed. You will be offered information and support to help you prepare feeds and sterilise feeding equipment as safely as possible. More information is available from: www.firststepsnutrition.org

Care of your baby after birth

Newborn screening

After birth, your baby will be offered several different types of health assessments.

Newborn and infant physical examination (NIPE)

- Your baby will be offered a physical examination during their first 72 hours. This includes an examination of their eyes, heart, hips and in boys, their testes.
- This examination is repeated when your baby is between six and eight weeks of age, as some conditions do not develop or become visible until then.

Newborn hearing screening test

- One to two babies in every 1,000 are born with a permanent hearing loss in one or both ears. Most of these babies are born into families with no history of hearing loss.

- Permanent hearing loss can significantly affect a baby's development.
- Your baby will be offered a hearing test, as if they do have a hearing loss, finding out early can give them a better chance of developing speech and language skills.

Newborn blood spot screening

Every baby will be offered a newborn blood spot screening (also known as the heel prick test) when they are five days old. A blood sample from your baby's foot will be used to find out if your baby has any of the following rare but serious health conditions:

- Sickle cell disease: Approximately 1 in 2,000 babies born in the UK has sickle cell disease (an inherited blood disease)
- Cystic fibrosis: Approximately 1 in 2,500 babies born in the UK has cystic fibrosis (an inherited condition affecting the digestive system and the lungs)

- Congenital hypothyroidism: Approximately 1 in 3,000 babies born in the UK has congenital hypothyroidism (a condition affecting the function of the thyroid gland)
- Inherited metabolic disorders:
 - phenylketonuria (PKU)
 - medium-chain acyl-CoA dehydrogenase deficiency (MCADD)
 - maple syrup urine disease (MSUD)
 - isovaleric acidemia (IVA)
 - glutaric aciduria type 1 (GA1)
 - homocystinuria (pyridoxine unresponsive) (HCU)

Approximately 1 in 10,000 babies born in the UK has PKU or MCADD. The other conditions are rarer, occurring in 1 in 150,000 to 300,000 babies. Babies with these inherited conditions cannot process certain substances in their food. Without treatment, babies with some of these conditions may become suddenly and seriously ill.

All findings from the tests and examinations will be discussed with you. Further information is available in the leaflet 'Screening tests for you and your baby' which is available from your midwife or you can download a copy from our website: www.uhs.nhs.uk/OurServices/Maternityservices/Your-pregnancy/Scans-and-screening-tests/Screening-tests.aspx

Vitamin K

Vitamin K is necessary to ensure that blood clots properly. Babies are born with low levels of vitamin K and they usually have enough to prevent problems, but some babies can be at risk of a bleeding disorder. For this reason, the Department of Health recommends that all babies are given vitamin K soon after birth. This is usually given by injection, but it can also be given by mouth (orally) instead, if you would prefer. If you choose the oral dose, it will be necessary for your baby to have further doses.

A factsheet about vitamin K and why it is offered is available from your midwife or you can download a copy from www.uhs.nhs.uk/maternity. It is important that you read this information during your pregnancy or immediately after your baby is born, as vitamin K will be offered to your baby shortly after birth.

Safety for your baby

Please do not walk around the ward with your baby in your arms. You could slip or other people may

bump into you. To prevent falls, we advise you to change your baby in the cot and also to place your baby in the cot to sleep at night.

Your baby will have two identity labels, one on each ankle. These will be checked with you before being put on your baby. If they come off at any time or become unreadable, it is your responsibility to tell a midwife. Please leave these labels in place until you are at home.

Do not allow anyone to take your baby under any circumstances. Should your baby require any tests or treatment, you will be encouraged to accompany your baby. If in doubt, ask a midwife. All members of staff will be wearing identity badges with the University Hospital Southampton NHS Foundation Trust logo.

Sleep safety

Sudden infant death syndrome (SIDS), also called 'cot death', is the sudden and unexpected death of a baby where no cause is found. The likelihood of this occurring is significantly reduced if your baby sleeps safely.

The safest way for your baby to sleep is:

- on their back
- in a separate crib or cot in a room with you for the first six months (avoid sleeping in the same bed as your baby)
- in a room where the temperature is between 16 and 20°C (use blankets rather than duvets or quilts)
- on a firm, clean, dry mattress
- in a smoke-free environment

Babies lose excess heat through their heads. To prevent your baby from overheating, it is important that you remove hats when your baby is indoors. However, you may be advised to place a hat on your baby if their temperature is low during the first 24 to 48 hours after birth. Please discuss this with your midwife, who will be able to advise you according to your baby's individual needs.

If you have any questions about looking after your baby safely, further information is available from your midwife or you can read the 'Keeping your baby safe' factsheet, which is available to download from our website: www.uhs.nhs.uk/maternity

More information can also be found on the Lullaby Trust website: www.lullabytrust.org.uk

Looking after yourself

Hand hygiene

During pregnancy and childbirth, you are at an increased risk of acquiring a bacterial infection. It is for this reason that good hand hygiene is of the utmost importance within hospital and at home. Cleaning hands is the simplest and most effective way to prevent bacteria being passed from person to person. One third of bacterial infections are preventable with good hand hygiene.

Hands should be washed:

- before and after handling food
- before eating
- after blowing your nose or sneezing
- before and after using the toilet or changing sanitary towels
- after changing a nappy
- when they are visibly dirty

It is important to remember to:

- remove jewellery and watches before washing hands
- keep nails short
- avoid touching stitches, wound dressings, drips or catheters unnecessarily if you have them

When washing your hands remember to concentrate on:

- nail beds
- thumbs
- palms
- back of the hands
- wrists

Wash for 20 seconds.

Good hand hygiene will prevent bacterial infections like diarrhoea and vomiting, food poisoning, flu, norovirus and MRSA. It is quick, simple and very effective.

Postnatal exercises

After the birth of your baby, it is important that you do some postnatal exercises, including pelvic floor exercises. This is to ensure that your muscle tone and figure return to their pre-pregnancy state, and to prevent problems such as incontinence in later life. Your midwife will discuss this with you. However, you are also advised to read the factsheet 'Shape up after pregnancy'. This is available to download from: www.uhs.nhs.uk/maternity

If there are any causes for concern, you may be referred to the obstetric physiotherapist for ongoing advice and support.

Factsheets on how to care for your perineum after birth if your baby is born vaginally and recovery after a caesarean section are also available to download from: www.uhs.nhs.uk/maternity

Please discuss any questions you have with your midwife.

Your emotional wellbeing

Having a baby and becoming a parent creates many changes to your home life, social life and relationships, and may cause you to experience a variety of emotions. Feeling emotionally unwell after a baby is born is common, so it is important that you are aware of:

- 'Baby blues': These are common, affecting eight out of ten women. They usually begin a few days after birth and may cause you to burst into tears for no apparent reason and then feel fine. Please discuss any concerns or anxieties with your midwife, health visitor or GP.
- Postnatal depression: This affects one in ten women and usually begins in the first six months after birth. It can lead to feelings of hopelessness. It is important to seek help and advice as soon as possible, as early diagnosis and treatment will lead to a faster recovery.
- Puerperal psychosis: This is rare, affecting one in 500 women, but very serious. Symptoms include hallucinations and delusions, and can be very frightening for you and your partner or family. It is important to seek help quickly to ensure early treatment.

If you are concerned that you may be experiencing any of these symptoms, you should seek help from your midwife, health visitor or GP. Further specialist care may also be arranged, if appropriate.

Contraception and sexual health

It is never too early to plan your family. Once at home, your GP or midwife will be willing to discuss family planning and contraception with you.

When you resume sexual activity following the birth of your baby, if you do not use contraception or you have a mishap, emergency contraception can be used to prevent pregnancy. For more information, visit: www.nhs.uk

Your care after you have returned home

Before you leave hospital or a birth centre

- Arrange for someone to take you home. It is advisable to have someone with you for the first few days when you get home to allow you to rest and recover. If you have concerns about the support available to you at home, please ask your midwife to speak to the hospital social worker for advice.
- Tell the midwife who discharges you whether or not you are going to your home address and give your current telephone number. If you are staying elsewhere, give that address. This is important so that the community midwife can continue the postnatal care for you and your baby. If you are going to a different address that is outside your GP's area, you will need to arrange for a GP and midwife to care for you while you are there.
- Please check that you do not take home any hospital property.
- Make sure that you take home any medicines prescribed by the hospital. You will be offered regular pain relief while in hospital, but you will need to ensure you have adequate paracetamol and ibuprofen available at home.
- Plan a safe journey home:
 - Please ensure that you are familiar with the car seat and how it fits into your vehicle. It is a good idea to bring the seat up to the ward before you take your baby home to adjust the straps according to your baby's size.
 - If you go home by taxi, tell the driver to come to the D level entrance. Remember it is a legal requirement for babies and young children to travel in an appropriate car seat. You should never use a rear-facing baby seat in the front of a car where an airbag is fitted (unless it is switched off).

More information about car seat safety can be found in the 'Keeping your baby safe' factsheet, which can be download from: www.uhs.nhs.uk/maternity

Immediate postnatal care

The postnatal care you will receive will be arranged with you once you are home. Postnatal appointments include phone consultations and face-to-face appointments. Appointments are usually held in a postnatal clinic within your local hub or birth centre. Please ensure you attend these appointments on time. If you anticipate difficulties with this or need

to rearrange an appointment, please contact the community midwifery co-ordinator on **023 8120 4909** or **07786 266529**.

Postnatal care is arranged in response to the needs of you and your baby, and may take place within your home if you have had a caesarean section, are having difficulties feeding your baby, or the wellbeing of you or your baby suggests this may be more appropriate. Your care will be provided by our team of midwives and maternity support workers, who will support you with feeding, weigh your baby and perform the newborn screening test. You are advised to refer to your screening booklet for more details before this test is performed. This is available from your midwife or you can download a copy from our website: www.uhs.nhs.uk/OurServices/Maternityservices/Your-pregnancy/Scans-and-screening-tests/Screening-tests.aspx

Please telephone the community midwifery co-ordinator on **023 8120 4909** or **07786 266529** if you have any non-urgent questions or concerns. The community midwifery co-ordinator is available from 7.30am to 5.30pm, seven days a week and will call you back if you leave a message.

Ongoing postnatal care

If both you and your baby are well when your baby is 11 to 13 days old, your midwife will transfer your care to your health visitor. As a specialist in childcare and development, your health visitor will visit you at home initially and advise you on the support available to you and your baby through local clinic services and 'sure-start' centres. Your health visiting team will continue to provide care and support until your child starts school.

Please ensure you arrange a postnatal appointment for yourself and your baby about six weeks after your baby's birth. This will include a repeat medical examination for your baby and a review of your health and wellbeing. You will need to make this appointment with your GP surgery unless you have been advised otherwise. You will also need to ensure your baby is registered at your GP surgery in order to make this appointment.

Registering your baby's birth

Your baby's birth must be registered within 42 days of birth. Although you must book an appointment to register your baby's birth at the register office, your baby does not have to attend this appointment. A birth registration appointment lasts about 20 minutes. For more information about who can register your baby's birth and details of the information you will be required to give, please visit: www.gov.uk/register-birth

An appointment should be booked at Southampton Register Office (located in Bugle Street, Southampton), if the birth you wish to register occurred at one of the following locations:

- Princess Anne Hospital
- a home birth at an address within the Southampton City Council boundary (postcode areas SO14 to SO19)

If your baby was born at the Princess Anne Hospital, but you don't live in the city, you can register your baby's birth at smaller local register offices, located in Romsey, Totton, Ringwood, Fareham, Eastleigh, Droxford, Winchester and Portsmouth. Opening hours may vary, so please check with your local office.

For more information and to book your appointment please visit: www.southampton.gov.uk

Neonatal care

If your baby requires extra care at birth, the Princess Anne Hospital has one of the largest regional neonatal units in the country, providing specialist care to term and preterm babies, in a spacious and welcoming environment.

Transitional care unit (TCU)

The transitional care unit (TCU) is situated on Burley ward on F level within the Princess Anne Hospital. It is jointly managed by maternity and neonatal services. You and your baby may transfer to the TCU if your baby requires some additional support, but does not require the services of the neonatal unit. Your baby's care will be led by a senior neonatal nurse supported by a team of specially trained nursery nurses.

While you are staying on the TCU, you will be cared for by a midwife or maternity support worker who will be available for help and advice on all aspects of your postnatal care.

Neonatal unit

If your baby needs special surgical or medical care, they will be looked after by specialist staff in the neonatal unit within the Princess Anne Hospital. The neonatal unit has 36 cots providing intensive, high dependency and special care for babies. Parents are welcome to be with their baby in the neonatal unit at any time.

Parents are encouraged to spend as much time as possible with, and looking after, their baby. The

doctors and nursing staff are always willing to talk with parents about their baby's wellbeing and progress. They are happy to answer any questions and help to address any worries or concerns parents may have. There is a family information room and a coffee room for parents. If your baby is admitted to the neonatal unit, all other facilities available for parents will be explained to you.

The care of babies admitted to the neonatal unit is led by a consultant paediatrician or surgeon, who is always willing to see and talk to parents about their baby. Siblings are welcome to visit at any time. Other adult relatives and friends may visit from 2.30pm until 4pm and from 6.30pm until 7.30pm when one of the parents is present. However, a maximum of three adult visitors are allowed within the neonatal unit at any one time due to limited space.

If you would like to see a midwife for a postnatal appointment when you come in to the hospital to visit your baby, please go to Broadlands birth centre (E level) where one of the community midwifery co-ordinators will be happy to see you. You do not need to make an appointment to see the community midwifery co-ordinator, however, you are asked to come after 10am and before 4pm. The community midwifery co-ordinators are available seven days a week and are also available to answer any questions via the phone between 7.30am and 5.30pm. Please phone **023 8120 4909** or **07786 266529** if you have any questions or concerns.

Health and safety within Princess Anne Hospital

Security

Security cameras are situated at strategic points around the hospital, and are linked to both a video recorder and to a television screen in the porter's office.

Digital locks are fitted to all ward area doors in the Princess Anne Hospital. Should you leave a ward area, especially at night, please ensure you do not leave the door open. If the doors are locked please do not let anyone in as you leave, unless a receptionist is present or the visitor has spoken to a member of staff.

Please make sure that you do not leave your purse or other valuables in your room unattended.

Not all hospital staff wear a uniform, but all staff should be wearing a University Hospital Southampton NHS Foundation Trust identity name badge. If you are approached by anyone who cannot identify themselves and you are concerned, call a health professional or staff member that you do know.

If you leave the ward for any reason, please tell a midwife where you are going.

Fire precautions

The fire alarms are tested routinely every Friday at 1pm. If they are tested at any other time, you will be informed.

In the event of a fire in the hospital, you will hear a voice over the public address system giving clear instructions for you to follow, although you may not be able to see smoke or flames. Parents and visitors should take instructions from the staff present, who will follow well-established procedures and, if necessary, escort you to a safe area. You may be requested to stay on the ward or leave the building. Please do as members of staff ask. If you see any evidence of a fire, please report this to a member of staff immediately. Whenever the fire alarm sounds, for safety reasons you should not use the lifts. Please do not enter the building if there are fire engines outside.

No smoking policy

Smoking can seriously damage your health and is particularly hazardous to babies. It can also upset other patients and staff, and create a fire risk, especially where medical gases are used. There is therefore a no

smoking policy in this hospital and its grounds.

Smoking when you are pregnant reduces the amount of oxygen available to you and your baby. This restricts your baby's growth and also has an impact on their development. If your partner or anyone else you live with smokes, their smoke can affect you and your baby as well.

At your first antenatal booking appointment, your midwife will ask you to do a breath test, which will measure the level of carbon monoxide in your breath. All pregnant women receive carbon monoxide monitoring whether they smoke or not. This is because your carbon monoxide levels are raised if you have been exposed to high levels of air pollution, have faulty gas appliances at home or share a home with people who smoke. Your midwife will discuss these results with you together with the benefits associated with you stopping smoking during your pregnancy. If you smoke or have recently stopped smoking, you will also be referred to one of our team of specialist smoking cessation midwives for additional support.

Your midwife will monitor your carbon monoxide level regularly as part of your antenatal care. You may wish to discuss your smoking cessation progress with your midwife. Your partner or other close family members and friends who smoke can support you by stopping too. This will improve the chances of you successfully giving up. Your midwife can refer them for help to stop too.

Protecting your baby from tobacco smoke while you are pregnant is one of the most important things you can do to improve your baby's health, growth and development. It can be difficult for you or your partner to stop smoking, but it's never too late. Every day you are smoke-free benefits you and your baby.

Respect for our staff

Please treat our staff with the same courtesy and respect that you would wish to receive from them. Staff are encouraged to complain about any verbal harassment or violent behaviour towards them. Their complaints are acted upon and any members of the public whose behaviour is inappropriate will be removed from the premises. Prosecution may also occur.

General information

Teaching and research

The Princess Anne Hospital is a teaching hospital and has strong links with the University of Southampton, providing placements for student midwives and medical students. You can help provide a valuable part of a student's training, but if you prefer not to have students present, please tell your midwife and your wishes will be respected.

Southampton is a leading centre for clinical research. It provides a wide range of opportunities for researchers, patients and industry to get involved in cutting-edge research that will allow us to understand more about the conditions we treat, and improve our healthcare services and the lives of patients for years to come. Within the Princess Anne Hospital, there are many research studies that you might be asked to help with. You may be approached by a member of our dedicated team of experienced midwives, nurses and doctors who recruit women to studies if the team feel there is an appropriate study for you. Taking part in a research study is optional and if you would prefer not to be involved your wishes will be respected. Please speak to your midwife or a member of the research team for more information.

Bounty distributor

The Bounty distributor visits the hospital on a regular basis to distribute packs containing free samples and educational literature. Packs for expectant mothers are distributed via antenatal clinics. Packs for new mothers are delivered to the bedside after the baby is born. These packs also contain the child benefit claim pack. Once you have left hospital, if you have any problems acquiring your Bounty packs, please telephone the Bounty Customer Care Line on **0800 316 9341**.

Birth Afterthoughts

The Birth Afterthoughts service provides you with an opportunity to:

- discuss your previous birth experience with a midwife at a mutually convenient time and venue
- examine your previous maternity care records. However, in order for your maternity care records to be available, you must have given birth under the care of University Hospital Southampton NHS

Foundation Trust. If you have birthed elsewhere, it is necessary for you to contact the hospital where your baby was born and obtain a copy of your hospital records.

Please speak to your midwife for more information. To arrange a Birth Afterthoughts appointment, please phone **023 8120 6834** and leave your name and contact number.

Your views

Your views are extremely important to us. The Friends and Family Test gives you the opportunity to give your view on the care you received. Feedback is shared with the appropriate departments so that we can continue to provide a high quality service that meets your needs.

If you wish to raise concerns about your care, please discuss these in the first instance with the clinician responsible for your care, such as your midwife, obstetrician or a member of the paediatric team looking after your baby. Written comments or complaints should be sent to the care group manager at the Princess Anne Hospital. Alternatively, you can email yoursay@uhs.nhs.uk and you will receive a full written response within one month of our receipt of your letter.

If you would like to become more involved in shaping the future of our maternity services, please contact maternity information and support services on **023 8120 6052** and they will be able to give you more information about the ways in which you can become involved.

Consultant midwives

Consultant midwives are experienced midwives who can help you by:

- listening to any concerns or anxieties you may have about giving birth
- discussing with you the most appropriate choices for you and your baby
- working with you to create an individualised plan for the birth of your baby

Your midwife will discuss your birth preferences with you and help you decide the birth environment that will best meet your needs. Consultant midwives can provide additional support and advice to ensure a safe and personalised experience for you and your baby.

You may also be offered an appointment if you have additional requirements or preferences that are outside of our usual recommendations. The consultant midwife can discuss your options with you in more detail.

Please speak to your midwife if you would like to be referred for a consultation.

Patient advice and liaison service (PALS)

If you have any concerns or need advice, you should first contact your midwife. For further help you can then contact our PALS team. They will be able to:

- advise and support patients, their families and carers
- provide information about NHS services
- listen to your concerns and suggestions
- help sort out problems quickly on your behalf

PALS are available Monday to Friday, 9am to 4.30pm. Out of hours there is an answer phone. PALS can be contacted in a number of ways, either by phone on **023 8120 6325**, email at PALS@uhs.nhs.uk or by calling in to the information point just inside the main entrance of Southampton General Hospital. Alternatively, you can write to us at:

Patient advice and liaison service
C level, centre block
Mailpoint 81
Southampton General Hospital
Tremona Road
Southampton
SO16 6YD

University Hospital Southampton NHS Foundation Trust birth centres

Broadlands birth centre
Princess Anne Hospital
Coxford Road
Southampton
SO16 5YA

Telephone: **023 8120 6337**

New Forest Birth Centre
Ashurst Hospital
Lyndhurst Road
Ashurst
Southampton
SO40 7AR

Telephone: **023 8074 7690**

For a translation of this document, or a version in another format such as easy read, large print, Braille or audio, please telephone **023 8120 4688**.

For help preparing for your visit, arranging an interpreter or accessing the hospital please visit: **www.uhs.nhs/additionalneeds**

www.uhs.nhs.uk