

Pregnancy and Birth Choices

My Personal Care and Support Plan



This booklet has been designed to help you plan your maternity care and record your thoughts and choices throughout your pregnancy. The following pages act as a guide for you, and may raise questions which you will want to speak to your midwifery team about, it is therefore advised that you take this booklet with you to all your appointments.

Writing down your thoughts and preferences can help you to explore, understand and record your individual choices for pregnancy, birth and early parenthood. You should revisit all sections of this plan at regular intervals as your individual needs and wishes are likely to change and develop as your pregnancy progresses.

This booklet accompanies the information provided by your local maternity service.

About me	
My name is:	
My due date is:	
I intend to give birth to my baby at:	
My midwifery team is:	
My midwife's name is:	
My midwife's contact details are:	
My named obstetric consultant is:	
My GP Practice is:	
My health visitor's name is:	
My health visitor's contact details are:	

What matters to me

The following pages are a space for you to think about and to document your thoughts and preferences for your pregnancy journey and your birth.

Your midwife/maternity team will discuss the things that matter to you, taking account of your personal and social circumstances, including family and support networks.

Use this section to note down the things that are important to you during your pregnancy and after the birth of your baby.

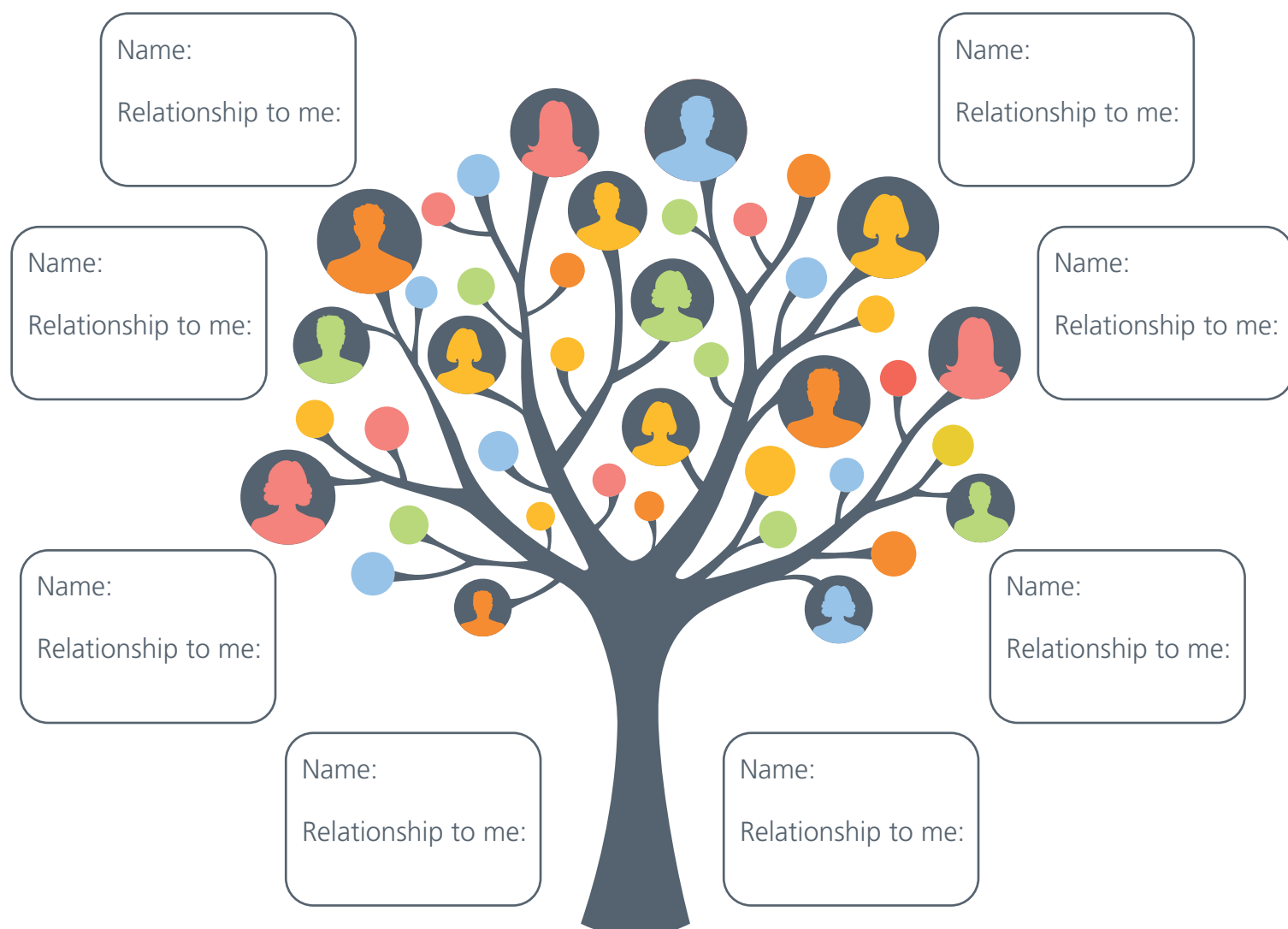
You can include anything that is important to you, some things to think about are:

- Your values and expectations about being pregnant, giving birth and becoming a mother.
- Your home/family/professional life and support networks.
- Any previous experiences of pregnancy and childbirth.
- Any fears or concerns you might have.



My support network

People who live with you or will support you through your pregnancy and after the birth of your baby, you can even note any pets!



My emergency contacts (Please provide details of 2 people who will be contacted in the event of an emergency):

Contact 1

Name:

Relationship to me:

Contact telephone number(s):

Contact 2

Name:

Relationship to me:

Contact telephone number(s):

My health & wellbeing during pregnancy

For further information about health and wellbeing in pregnancy please refer to: www.nhs.uk/conditions/pregnancy-and-baby/

There are many conditions that may or may not have an impact on your pregnancy. Ask your GP, doctor or midwife about any conditions you have, or may have had in the past.

- ☐ I have discussed my pre-existing health condition/s with my midwife/maternity team
- ☐ I require further support with my health condition/s or special needs
- ☐ I need more information/support with this
- ☐ Additional information has been provided to me

Use this space to note down any thoughts, feelings or questions you may have about any existing or previous health conditions:

I am taking the following medication and/or supplements:



It is recommended that you take folic acid supplements before conception and up until 12 weeks of pregnancy. It is also recommended that you take Vitamin D supplements throughout pregnancy. Any other medications should be discussed and reviewed with your maternity team.

- ☐ I am aware of the recommendations and I have discussed this with my midwife/maternity team
- ☐ I need more information/support with this
- ☐ Additional information has been provided

If you have any special requirements, please tell your maternity team as early as possible.

- ☐ I will need help at appointments to translate into my language
- ☐ I have allergies and/or special dietary requirements
- ☐ I have religious beliefs and customs that I would like to be observed
- ☐ I/my partner have additional needs
- ☐ I/my partner have previous pregnancy/birth experiences we would like to discuss
- ☐ Other (please give details)

Please give any details of your special requirements here and discuss these with your midwife/maternity team.

Use this space to record any thoughts, feelings or questions you have about your health and wellbeing in pregnancy:

Lifestyle and wellbeing

Maintaining a healthy lifestyle is important, particularly during pregnancy. The free Baby Buddy App is a great support tool to help you make any changes and set manageable goals.

Height	
Weight	
BMI	
CO Reading	
Date readings taken:	

Height	
Weight	
BMI	
CO Reading	
Date readings taken:	

Height	
Weight	
BMI	
CO Reading	
Date readings taken:	



Physical Activity

Your midwife will be able to give you tailored information about exercise during your pregnancy. Further information is also available here:

<https://www.nhs.uk/start4life/pregnancy/exercising-in-pregnancy/>

www.nhs.uk/conditions/pregnancy-and-baby/pregnancy-exercise/

- ☐ I have a condition that affects my ability to exercise and I would like guidance from my midwife
- ☐ I need more information/support with this
- ☐ Additional information has been given to me



Physical activity for pregnant women



Helps to control weight gain



Helps reduce high blood pressure problems



Helps to prevent diabetes of pregnancy



Improves fitness



Improves sleep



Improves mood

Not active?

Start gradually

Already active?

Keep going



Do **muscle strengthening** activities twice a week

Every activity counts, every minute counts, more is better

No evidence of harm

Listen to your body and adapt



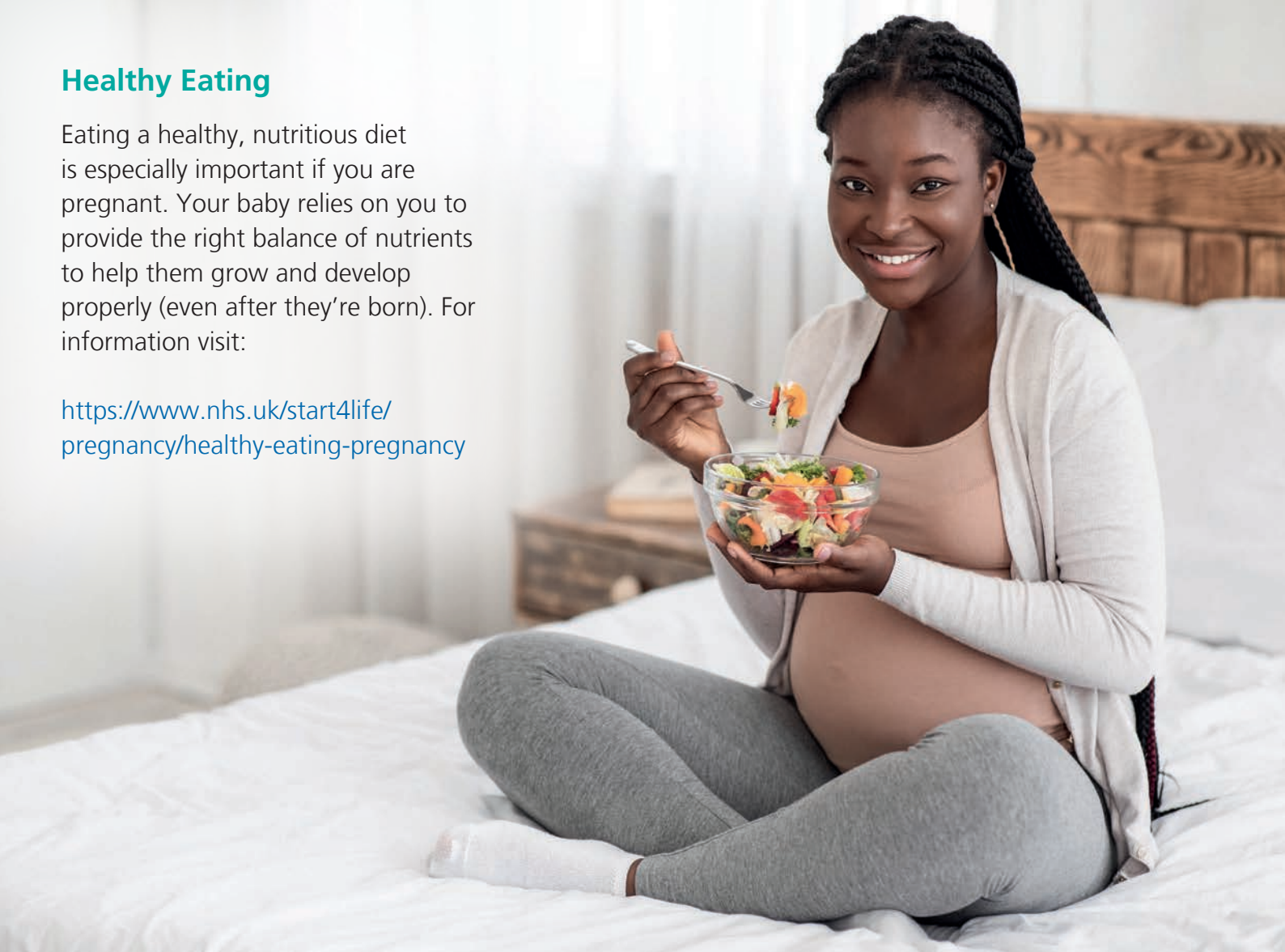
Don't bump the bump

UK Chief Medical Officers' Physical Activity Guidelines, 2019

Healthy Eating

Eating a healthy, nutritious diet is especially important if you are pregnant. Your baby relies on you to provide the right balance of nutrients to help them grow and develop properly (even after they're born). For information visit:

<https://www.nhs.uk/start4life/pregnancy/healthy-eating-pregnancy>



Foods to avoid

Some foods should be avoided during pregnancy as they can cause harm to you and your unborn baby. Recommendations change about which foods to avoid, please refer to the NHS website to get the latest information:

www.nhs.uk/conditions/pregnancy-and-baby/foods-to-avoidpregnant

- ☐ I am aware of what foods to avoid in pregnancy
- ☐ I need more information/support with this
- ☐ Additional information has been given to me

Healthy Start Vitamins

These can be obtained from your GP or local pharmacy and contain both Folic acid and Vitamin D. You may be eligible for the Healthy Start Scheme where you will receive free vouchers every week to spend on milk and fresh or frozen fruit and vegetables. Ask your midwife for a leaflet or visit :

<http://www.healthystart.nhs.uk/>



Alcohol

It is safer not to drink any alcohol during pregnancy, because it can damage your growing baby. By not drinking, you are protecting your baby and minimising the risks to their development and future health. Alcohol passes via your bloodstream through your placenta into your baby. Your baby cannot process alcohol like you can, and too much can be extremely harmful to their development. If you carry on drinking, especially in the first 3 months of pregnancy, the risk of miscarriage, premature birth and low birth weight are increased. For more information visit:

<https://www.nhs.uk/start4life/pregnancy/alcohol/>

Your midwife will discuss your weekly alcohol intake with you and record this here:

Date:				
Weekly Alcohol Intake:				

Smoking

There is lots of help available to help you stop smoking at any stage of your pregnancy so you don't have to do this alone. Your local Stop Smoking service offers free, one-to-one advice, support and encouragement.

You can talk to your midwife/maternity team or your GP for support with quitting smoking, drinking alcohol or taking recreational/illegal drugs. Further information is available here:

www.nhs.uk/conditions/pregnancy-and-baby/alcohol-medicines-drugs-pregnant/
www.nhs.uk/conditions/pregnancy-and-baby/smoking-pregnant/

- ☐ I would like support to help me stop smoking
- ☐ I would like support to help me reduce my alcohol intake
- ☐ I would like support to help me with illegal/recreational drugs
- ☐ I would like support for my partner regarding smoking/drugs/alcohol
- ☐ I need more information/support with this
- ☐ Additional information has been given to me

Vaccinations

Flu vaccinations are available for free during the winter season (October to January) and are recommended for all pregnant women. Ask your midwife or GP for further information.

The whooping cough (pertussis) vaccination is highly effective in protecting your baby from developing whooping cough in the first few weeks of their life. This will be offered by your GP surgery from the 16th week of pregnancy.

Impact of smoking and exposure to second-hand smoke in pregnancy



Do you live in **Shropshire or Telford & Wrekin** and would like to speak to someone about stopping smoking?

Call our friendly team today to get expert advice on how to stop smoking.

	Maternal Smoking	Second-hand Smoke Exposure
Low Birth Weight	Average 150g lighter	Average 30-40g lighter
Stillbirth	Double the likelihood	Increased risk
Miscarriage	24%-32% more likely	Possible increase
Preterm birth	27% more likely	Increased risk
Heart defects	50% more likely	Increased risk
Sudden Infant Death	3 times more likely	45% more likely

Contact the Stop4Two team today on 01952 565732 or text 07864 954022 / 07841 807829

Contact your local service:

Telford & Wrekin Stop4Two Team: Telephone: 01952 565732 Text: 07864 954022 / 07841 807829

Shropshire Public Health Specialist Pregnancy Stop Smoking Service
Telephone: 01743 254233 / 07979 540 495

You are four times more likely to quit with support.

Source: Passive Smoking and Children, Royal College of Physicians and Royal College of Paediatrics and Child Health, 2010

Stop Smoking illustration courtesy of Freepik.com





Maternity Exemption Certificate

Have you received your maternity exemption certificate either electronically or in the post? A maternity exemption certificate entitles you to free prescriptions and NHS dental care during pregnancy and in the 12 months following your due date. Speak to your midwife if you have not yet received your certificate.

Care of your teeth and gums

Your dental health care is important during pregnancy and it is free at an NHS dentist. To find your nearest dentist, access www.nhs.uk and click ‘find a dentist’.

Use this space to record any thoughts, feelings or questions you have about your lifestyle and wellbeing in pregnancy, including any personal goals:

Emotional health and wellbeing

Expecting a baby can be a joyful and exciting time, however it is also common to experience anxiety, depression or emotional distress. This tool may be helpful:

www.tommys.org/pregnancy-information/im-pregnant/mental-health-during-andafter-pregnancy/wellbeing-plan

I have (or have previously experienced) a mental health issue:

- | | |
|--|---|
| <input type="checkbox"/> Anxiety | <input type="checkbox"/> Depression |
| <input type="checkbox"/> Obsessive compulsive disorder (OCD) | <input type="checkbox"/> Eating Disorder |
| <input type="checkbox"/> Post-traumatic stress disorder | <input type="checkbox"/> Personality disorder |
| <input type="checkbox"/> Bipolar affective disorder
(also known as manic depression or mania) | <input type="checkbox"/> Schizophrenia or any other psychotic illness |
| <input type="checkbox"/> Schizoaffective disorder | <input type="checkbox"/> Postpartum psychosis |
| <input type="checkbox"/> Any other mental health condition (please give details) | |

If you have any mental health issues currently or have experienced them in the past, you should discuss this with your midwife or GP as soon as possible so they can help you get support from a specialist perinatal mental health service. Feelings that you and your partner should look out for in each other include:

- | | |
|--|--|
| • Tearfulness | • Feeling overwhelmed |
| • Feeling irritable or arguing more often | • Difficulty concentrating |
| • Changes in appetite | • Problems sleeping or extreme energy |
| • Racing thoughts | • Feeling very anxious |
| • Loss of interest in things you normally like | • Repeating actions or developing strict rituals |
| • Being so afraid of birth you do not want to go through with it | • Suicidal feelings or thoughts of self-harm |
| • Having unpleasant thoughts that you cannot control or keep coming back | • Lack of feeling towards your unborn baby |

Specialist support for anxiety and depression or any other mental health condition is available. If you feel that you need some emotional support, you can refer yourself to your local talking therapies. They are free and pregnancy is prioritised:

[www.nhs.uk/Service-Search/Psychological-therapies\(IAPT\)/LocationSearch/10008](http://www.nhs.uk/Service-Search/Psychological-therapies(IAPT)/LocationSearch/10008)

- ☐ I am aware that I can access mental health support and I know how to do this
- ☐ I need more information/support with this
- ☐ Additional information has been provided to me



Getting to know your baby during your pregnancy will help to build strong parental relationships, as well as helping with your emotional wellbeing. Here are some ideas for you to try:

- Talking, reading, singing or playing music to your unborn baby
- Gently massaging your bump
- Pregnancy yoga and/or hypnobirthing
- Using an app to track your baby's growth and development (e.g. Baby Buddy)
- Reading UNICEF's 'building a happy baby guide'

www.unicef.org.uk/babyfriendly/baby-friendly-resources/relationship-building-resources/building-a-happy-baby/

Doing these simple things regularly is known to release a hormone called oxytocin, which can help your baby's brain to develop and makes you feel good.

Things you can do to enhance your emotional wellbeing:

- Taking regular gentle exercise, such as pregnancy yoga, walking or swimming
- Ensuring you eat well
- Trying relaxation techniques, listening to music, meditation or breathing exercises
- Taking time for yourself, somewhere you can relax
- Talking to someone you trust (e.g. friends, family, midwife or GP)
- Asking for practical help with household chores or other children

Relationships

During pregnancy, your hormones can make you feel a mix of emotional highs and lows, some women may feel more vulnerable or anxious and have trouble coping with their feelings. A positive relationship can make you feel loved and supported, and more able to deal with things.

1 in 4 women will experience domestic abuse or domestic violence at some point in their lives. Sometimes abuse may start when you are pregnant or it may get worse during or after pregnancy. It may be difficult to recognise or admit what is happening but it is important to remember that domestic violence and abuse can happen to anyone and you are not alone.

If you not comfortable talking to your midwife, you can call the Women's Aid 24 hour domestic violence helpline on 0808 2000 247. Remember that anything you say to your midwife or doctor is in confidence.

<https://www.nhs.uk/conditions/pregnancy-and-baby/domestic-abuse-pregnant/>

Use this space to record how you are feeling at the moment, including any worries or concerns and talk to your midwife, GP or support network:

Personalised birth choices

Where to give birth

You have a choice about where to have your baby. Your midwife or maternity team will be able to tell you what services are available locally and support you to make a decision about which service you would like to use. A final decision will not be required until 36 weeks of pregnancy. Please refer to the Birth Place Choice leaflet to help you with this decision. Being an observer to the birth of a baby can be difficult, your birthing partner(s) will also be able to access reassurance and support from the maternity team.

- ☐ I would like to give birth at home
- ☐ I would like to give birth in a Freestanding Birth Centre
- ☐ I would like to give birth in an Alongside Birth Centre
- ☐ I would like to give birth in an Obstetric Unit
- ☐ I am not yet sure where I would like to give birth

Use this space to record any thoughts, concerns or questions you have about where to give birth:

Companions/Birthing Partners

Having your partner or a companion you can 'lean on' and who can support you during your labour can be helpful. It has been shown to reduce the need for pain relief. A maximum of two birthing partners are allowed with you during labour.

If you decide to have birthing partners, please consider if you are happy for them to hear details about your medical history which may be discussed with you during labour.

Please let us know who they will be here:

Partner 1	
Name:	
Relationship to me:	
Contact telephone number(s):	
Partner 2	
Name:	
Relationship to me:	
Contact telephone number(s):	



Companions/birthing partners during forceps or ventouse delivery

A forceps delivery is where forceps are placed round the baby's head to pull him or her gently from the birth canal. Ventouse delivery is when the baby is guided out using a cap fitted to its head by suction.

- ☐ I would like my companion(s)/birthing partner(s) to be with me if I have a forceps or ventouse delivery
- ☐ I would not like my companion(s)/birthing partner(s) to be with me if I have a forceps or ventouse delivery
- ☐ I do not mind if my companion(s)/birthing partner(s) are with me if I have a forceps or ventouse delivery
- ☐ I am not sure yet whether I would like my companion(s)/birthing partner(s) to be with me if I have a forceps or ventouse delivery
- ☐ I need more information/support with this

Companions/birthing partners during a caesarean section (CS)

A caesarean section is when the baby is delivered by an operation, cutting through the abdomen and into the womb by a spinal anaesthetic or an epidural. There are some situations where this is the safest option for either you or your baby and your doctor will discuss this recommendation with you. If your caesarean section is carried out under local anaesthetic and you are awake, your partner or companion will be able to be with you if you would like.

- ☐ I would like my companion(s)/birthing partner(s) to be with me if I have a caesarean section
- ☐ I would **not** like my companion(s)/birthing partner(s) to be with me if I have a caesarean section
- ☐ I do not mind if my companion(s)/birthing partner(s) are with me if I have a caesarean section
- ☐ I am not sure yet whether I would like my companion(s)/birthing partner(s) to be with me if I have a caesarean section
- ☐ I need more information/support with this

Use this space to record any thoughts, concerns or questions you have about companions/birthing partners:

Doctors, Midwives or Nurses in training

Midwives, Nurses and Doctors need to observe women in labour as part of their training. They will always be supervised by a senior health professional.

- ☐ I am happy for a trainee to be present during my labour
- ☐ I do not want a trainee to be present during my labour
- ☐ I am not sure yet
- ☐ I need more information/support with this

Induction of labour

In some circumstances your midwife or obstetrician may offer to start your labour artificially, instead of waiting for it to start naturally (this is known as induction of labour). There are a number of reasons for offering induction of labour and if this is something that may be required, this will be planned carefully with you.

Further information can be found at www.nice.org.uk/guidance/CG70

- ☐ I am aware of why induction of labour might be recommended for me, and have discussed my options
- ☐ I need more information/support with this

Keeping active during labour

Keep active for as long as you feel comfortable as this helps the progress of the birth. Keeping active doesn't mean doing anything strenuous, just moving around normally.

- ☐ I would like to move around during labour
- ☐ I do not want to move around during labour
- ☐ I am not sure yet
- ☐ I need more information/support with this

Positions for labour and birth

Find the positions you prefer and which will make labour easier for you. Try out various positions at antenatal classes or at home to find out which are the most comfortable for you. You can choose as many positions as you want and vary them throughout your labour.

- ☐ I would like to be in bed with my back propped up with pillows
- ☐ I would like to be standing
- ☐ I would like to be sitting
- ☐ I would like to be kneeling
- ☐ I would like to be kneeling on all fours
- ☐ I would like to be squatting
- ☐ I would like to be lying on my side
- ☐ I am not sure yet which positions I would like to be in during labour



Pain relief options

There are many different pain relief options. Some women use a combination of methods. You may find that you want more pain relief than you had planned, or that more effective pain relief may be advised to assist with delivery. You can use a number of different methods at different times. Your options for pain relief will depend on where you plan to give birth.

Your midwife will discuss the options that are available to you depending on where you have chosen to give birth.

Further information is available in your Birth Place Choice leaflet or at www.labourpains.com/home

- ☐ I would like to try breathing and relaxation
- ☐ I would like to try being in water during labour and /or birth
- ☐ I would like to try massage
- ☐ I would like to try acupuncture
- ☐ I would like to try TENS (transcutaneous electrical nerve stimulation)
- ☐ I would like to try hypnobirthing
- ☐ I would like to try gas and air (Entonox)
- ☐ I would like to try pain-relieving injections
- ☐ I would like to try an epidural
- ☐ I would like to try other methods of pain relief
- ☐ I would prefer to avoid using pain relief
- ☐ I need more information/support with this

Birthing equipment and facilities

Your circumstances in labour may influence what choices are available to you. Your midwife will discuss this with you at 34-40 weeks.

You may find that items such as birthing balls, mats or bean bags help you to change position and remain comfortable during labour. If you are giving birth in a maternity unit, your midwife will be able to tell you if specific items are normally available. However, you may need or prefer to provide some equipment yourself.

Your midwife will be able to tell you what's available and you can also refer to your Birth Place Choice leaflet.

I would like:

- | | |
|--|--|
| <input type="checkbox"/> Birthing Ball | <input type="checkbox"/> Bean bags, birth stools and birth couches |
| <input type="checkbox"/> Birthing Pool | <input type="checkbox"/> Music to be played (which I will provide) |
| <input type="checkbox"/> Dimmed lights | <input type="checkbox"/> I prefer to wait and see |
| <input type="checkbox"/> I need more information/support with this | |

Fetal heart rate monitoring

During labour and birth, it is recommended that your baby's heartbeat is monitored to help to assess the baby's wellbeing and how well they are coping with labour.

You can learn more about fetal monitoring on the NHS website: www.nhs.uk/conditions/pregnancy-and-baby/what-happens-during-labour-and-birth/

- ☐ I prefer to have intermittent fetal heart rate monitoring with a handheld device
- ☐ I prefer to have continuous fetal heart rate monitoring using a CTG machine
- ☐ If continuous monitoring is recommended I would like to be mobile
- ☐ I do not wish to have monitoring
- ☐ I am not sure yet
- ☐ I need more information/support with this

Vaginal examinations

During labour, your midwife or obstetrician are likely to recommend vaginal examinations to assess the progress of your labour. Vaginal examinations are a routine part of assessing labour progress and will not be undertaken without your consent.

- ☐ I am aware of why vaginal examinations are part of routine care
- ☐ I am very worried about vaginal examinations
- ☐ I do not wish to have vaginal examinations
- ☐ I need more information/support with this

Interventions

In some circumstances, your midwife or obstetrician may offer interventions to assist with your labour. Interventions may be recommended if your labour slows down, or if there are concerns about you or your baby's health.

- ☐ I am aware of why assistance/interventions might be recommended
- ☐ I do not want to have any intervention in labour
- ☐ I am not sure yet
- ☐ I need more information/support with this

Assisted and caesarean birth

An assisted or caesarean birth may be recommended if it is thought to be the safest way to deliver your baby; your obstetrician will discuss this with you and ask for your consent before any procedure is undertaken.

- ☐ I understand why an assisted birth or caesarean may be recommended
- ☐ I need more information/support with this



Episiotomy

In some circumstances, your midwife or obstetrician may recommend a cut to the perineum to facilitate birth (episiotomy). This may be necessary if the perineum will not stretch enough and may tear, or if the baby is short of oxygen and needs to be delivered quickly.

- ☐ I understand why an episiotomy might be recommended
- ☐ I would prefer to avoid an episiotomy, but would give my consent at the time if it was required
- ☐ I do not consent to episiotomy under any circumstances
- ☐ I need more information/support with this

Use this space to record any thoughts, concerns or questions you have about your labour and giving birth:



After my baby is born

Delivering the placenta

After your baby is born your midwife will offer you an injection in your thigh. This contains the drug syntometrine or syntocinon which helps the womb contract and can prevent the heavy bleeding which some women may experience without it.

- ☐ I have discussed with my midwife what happens after labour and after the placenta is delivered
- ☐ I need more information/support with this

Skin to skin contact with your baby

Immediately after the birth you can usually have your baby lifted straight onto you before the cord is cut so you can be close to each other immediately. This is known as skin to skin contact and is recommended for a minimum of an hour, (for as long as mother wants) or until after the first feed. This can help with bonding with your baby and breastfeeding.

More information is available at: www.unicef.org.uk/babyfriendly/baby-friendly-resources/implementingstandards-resources/skin-to-skin-contact/

As long as you and your baby are both well, skin to skin can be done following any type of birth. Your partner can also have skin to skin contact with your baby.

- ☐ I understand why skin to skin contact is recommended
- ☐ I would like immediate skin to skin contact if possible
- ☐ My birth partner/companion would like immediate skin to skin contact if possible
- ☐ I do not want skin to skin contact
- ☐ I prefer to wait and see
- ☐ I need more information/support with this

Vitamin K for your baby

Vitamin K is needed to make the blood clot properly. Some newborn babies have too little Vitamin K so it may be suggested that your baby be given Vitamin K either by injection or by mouth. Your midwife will discuss this with you between 36 – 38 weeks of pregnancy.

Further information is available on page 53 of the Pregnancy Information Booklet or at: www.sath.nhs.uk/wp-content/uploads/2016/09/Pregnancy-Information.pdf

- ☐ I want my baby to be administered Vitamin K by an intramuscular injection
- ☐ I want my baby to be administered Vitamin K orally (by mouth)
- ☐ I do not want my baby to be given Vitamin K
- ☐ I need more information/support with this



Feeding your baby

Your midwife will provide you with information about the options for feeding your baby.

Further information is available here: <https://www.tommys.org/pregnancy-information/labour-birth/after-birth/feeding-your-baby>

- ☐ I would like to breastfeed my baby
- ☐ I would like to bottle feed my baby with expressed breast milk
- ☐ I would like to feed my baby formula
- ☐ I would like to use a mixture of breastfeeding and formula
- ☐ I am not sure yet how I would like to feed my baby
- ☐ I am aware of how to get feeding off to a good start
- ☐ I am aware of the signs to look out for that my baby might be ready to feed
- ☐ I need more information/support with this

Use this space to record any thoughts, concerns or questions you have about feeding your baby:



Preparing for the first few hours and days after birth

Visiting

Depending on where you choose to give birth, it may not always be possible for your birthing partner/companion(s) to stay with you in all areas at all times. Visiting hours may also vary.

- ☐ I am aware of my chosen birthing centre’s policy on partners/companions staying with me
- ☐ I have checked visiting times and I am aware of when and who can visit me after the birth
- ☐ I need more information/support with this

Returning home

It is useful to begin to think about having things ready at home. Use this space to make any notes about the things you could do now to make caring for yourself and your baby easier at home and to think about who will be able to support you after giving birth when you return home.





My physical and emotional wellbeing after birth

There is helpful information available here: www.nhs.uk/conditions/pregnancy-and-baby/you-after-birth

Physical health

You can be prepared for your physical recovery after giving birth in order to help get you and your new family off to the best start. Things to be aware of include:

- Postnatal pain relief options
- Physical changes you can expect
- The importance of hand hygiene
- Signs of infection and what to do
- Pelvic floor exercises
- Physical recovery after a caesarean section

Your midwife or doctor will be able to provide you with your personal postnatal advice and any specific requirements after the birth of your baby.

Use this space to record any thoughts, concerns or questions you have about your physical recovery after the birth of your baby:

Emotional health

Giving birth, becoming a parent and having a newborn baby can be an emotional time. You should consider:

- Emotional changes you can expect
- Things that your family and friends can do to support you
- When and how to access emotional and mental health support after giving birth

Feelings that you or your partner should look out for in each other include:

- Persistent sadness/low mood
- Lack of energy/feeling overly tired
- Feeling unable to look after your baby
- Problems concentrating or making decisions
- Changes in appetite
- Feelings of guilt, hopelessness or self-blame
- Difficulty bonding with your baby
- Problems sleeping or extreme energy
- Loss of interest in things you normally enjoy
- Having unpleasant thoughts that you cannot control or keep coming back
- Suicidal feelings or thoughts of self-harm
- Repeating actions or developing strict rituals

Please take the time to discuss this list with members of your support network.

Use this space to record any thoughts, concerns or questions you have about your emotional health after the birth of your baby:





Caring for my baby

You may find the following information useful during the first few weeks of looking after your baby:

www.nhs.uk/conditions/pregnancy-and-baby/being-a-parent/

Things to consider before going home:

- How to tell if your baby is feeding well
- Signs of an unwell baby and what to do if you are worried
- What to expect in your baby's nappy

Things to consider for when you get home:

- Safe sleeping practices
- Newborn jaundice, what is normal and when to seek advice
- Newborn blood clot screening (heel prick test)
- Umbilical cord care and skin care
- Bathing your baby
- BCG vaccination (if you have been advised that your baby needs this)

Your midwife will be able to provide information and support if you are not sure about anything.

Community care and next steps

Community postnatal care is delivered in a variety of settings and by a multidisciplinary team of care professionals.

Make sure you are aware of:

- How to contact your local community midwives
- How to contact your health visitor
- How to access additional infant feeding support
- How to access services from your local children's centre

Further information about the role of your health visitor is available here: www.nhs.uk/conditions/pregnancy-and-baby/baby-reviews/

In the weeks following your baby's birth you should:

- Register your baby's birth within six weeks by contacting your local Register Office
- Register your baby with a GP Practice
- Book a postnatal check with your GP between 6 and 8 weeks after the birth of your baby
- Arrange any tests recommended by your midwife or doctor

Notes and reflections

It can be helpful to reflect on your experiences throughout pregnancy and birth. Please use this section for any notes you wish to record either during your pregnancy or after the birth of your baby. Your midwife will be able to go through your birth experience and give you the opportunity to clarify any events.

HAPPY HEALTHY BABIES DON'T STOP MOVING

FEELING YOUR BABY MOVE IS A SIGN THAT THEY ARE WELL



Working with you

IF YOU ARE CONCERNED ABOUT YOUR BABY'S MOVEMENTS
PLEASE CALL OBSTETRIC TRIAGE: 01952 565948 / 01952 565712



We need families who have recently used these services and local maternity staff to join us, share their views and experiences, and help us co-produce our Local Maternity Services.

To find further details on what you can get involved in or to send us some feedback on your experiences:



Email us on Maternity.voices@nhs.net



Find us on Facebook@[MaternityVoicesShropT](https://www.facebook.com/MaternityVoicesShropT)



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Better Births
Shropshire, Telford & Wrekin

