Midwifery-led pathway

Guidance for mothers

The Hillingdon Hospitals
NHS Foundation Trust
Hospital telephone number: 01895 238282
Antenatal Clinic: 01895 279442
Community Midwives: 01895 279472
Triage: 01895 279441
Fax: 01895 279613
Web: www.thh.nhs.uk

Midwife name:

Children’s Centre:

Please remember to bring your blue maternity notes with you to all appointments.
The Hillingdon Hospitals NHS Foundation Trust aims to provide all pregnant women with a first class service, led by experienced and caring professionals.

The Maternity Unit at Hillingdon offers a midwifery led service which exists within our current labour ward environment. We believe that women should be able to choose a midwifery led service where appropriate, and this can be facilitated either on our labour ward or at home.

We understand that each woman has individual needs and requirements in labour and therefore we can adapt our birthing rooms to facilitate the right environment for any birth (with the exception of caesarean section). Caesarean sections are performed in our maternity theatres.
What does this pathway mean for you?

The midwife will be the lead professional during your pregnancy, and she/he will continue to care and support you throughout your labour and postnatal care. The midwife is an expert in non-complicated midwifery and she will only refer you to a doctor if complications arise. The midwife is committed to providing women-centred, high quality evidence-based practice to you throughout your care at The Hillingdon Hospital NHS Trust.

The Midwifery-led pathway is suitable for women who do not have any serious complications in their pregnancy or risks from previous pregnancies or medical problems. It is hoped that the aim of the pathway will lead to less intervention for you in labour.

If you develop complications during pregnancy and/or labour we will ensure you are referred the Maternity team pathway (a leaflet will be given to you).

How do I book onto the Midwifery-led pathway?

You can contact the midwife at your doctor’s surgery as soon as you know that you are pregnant, ideally this should be soon after you have missed your first menstrual period. The midwife or General Practitioner will send a form with your details to the hospital of your choice. You can also book directly with the maternity unit by accessing the Hillingdon Hospital website on www.thh.nhs.uk. Go to departments and click on Maternity where you will be directed to complete a self referral form.

The hospital will contact you to arrange a suitable date and time, so that your midwife can complete your “booking” history. This initial assessment will take about 1 hour to complete, but will enable the midwife to have a comprehensive review of your medical, social and obstetric record. We aim to see all pregnant women for their booking appointment before 13 weeks of pregnancy.
When will I have a scan?

Once the hospital has received your referral letter an appointment will be sent to you for a scan. This appointment will be made for when you are between 11 to 13 weeks of your pregnancy. When you have attended this appointment, your next scan will be booked for when you are between 18 to 21 weeks pregnant.

Where and when will I see the midwife for antenatal care?

The midwives are based in either the community or hospital settings. Antenatal checks can be carried out at your General Practitioner surgery, Children’s Centre or Antenatal Clinic. Your midwife will give you details on telephone numbers and your schedule of antenatal appointments. The midwife will follow the recommended NICE: guidance for “Routine Care for the Healthy Pregnant Woman (2008)” During these appointments it is important for you and your partner to discuss any hopes and fears you may have.

Can I have a home birth?

Yes. As you are booked under the Midwifery-led pathway this option is available for you, providing you are living in the London Borough of Hillingdon. Your midwife can discuss this choice with you at any point during your pregnancy. There is supportive evidence that birth at home is as safe as hospital for both you and your baby if you are both in good health without medical problems.

What if I have any problems during my pregnancy?

Your midwife is trained to identify early potential problems with your pregnancy. After discussion with you she may need to refer you to the Maternity team. If this
happens the midwife will place an orange (Variance) sticker in your notes to highlight to the Maternity team the reason why you are being referred. For some women this may mean remaining on the Maternity team pathway. For others following assessment they will be able to return to Midwifery-led pathway (pink Variance) sticker.

**Who do I contact if I have a problem?**

If you develop problems in your pregnancy, feel unwell or concerned with your baby’s movement, please contact your GP in the first instance. If your GP if unable to see you, please ring Triage on 01895 279441 (24 hour service, 7 days a week). You can speak to a midwife who will either give you advice over the phone or invite you to Triage to have an antenatal check.

You will need to contact your GP surgery if you have any non-pregnancy related problems, such as feeling generally unwell, diarrhoea, vomiting, or chest infections.

If you require non-urgent advice you can contact the community midwives office on 01895 279472 (Mon – Fri: 8.00 – 16.00). You can leave a message with the administrator and your midwife will return your call when she is next on duty.

**What do I need to plan for the birth of my baby?**

The midwife will discuss with you your birth plan during your pregnancy. If this is your first baby you can book and attend parentcraft workshops at the hospital by contacting 01895 279472. Please book these classes by 24 weeks of your pregnancy to ensure you have a place. The more you understand about labour, pain relief options and birth, the better prepared you and your partner will be.

Alternative parentcraft workshops are available at children’s centres across the borough. This can be discussed with you when you call the community midwives phone number.

Women’s bodies are designed to grow and give birth to babies. During your pregnancy it is ideal to think of ways to increase your confidence and trust in your body’s ability to birth your baby. It is beneficial to have a
Think about your birth supporter with care, don’t assume that your husband or partner is the best or the only person for the job.

If your partner is likely to feel anxious and uncomfortable then it might be preferable if he stayed outside for some of your labour with someone else to support him. There is good evidence that a close female friend or relative can be a helpful labour supporter.

As we encourage early discharge from the unit if everything is normal you may need to plan ahead for when you arrive home with your baby.

### Who will provide care while I’m in labour?

Under Midwife Led Pathway a midwife will be allocated to you during the birthing process. You may not have met this midwife before. Research indicates that women who felt confident and supported by their midwife will achieve birth with little or no intervention. You will be asked if you would be willing to have a student involved in your care.

### What can I expect in labour if I am booked under Midwifery-led pathway?

It is our aim to support you to achieve a straightforward birth with as little intervention as possible. The midwife will discuss your birth plan or any wishes you have for labour.

During labour your progress is monitored closely and the midwife will listen to your baby’s heartbeat with a handheld device. Continuous electronic monitors are not used routinely, unless there is an indication.
With continuous electronic fetal monitoring you are more likely to have an instrumental birth, a caesarean and have a greater need for pain relief.

The midwife will be guided by your requests and will encourage you with mobilisation, help with breathing and coping strategies and offer water as a method of pain relief. Transcutaneous electrical nerve stimulation (TENS), Entonox (gas and air), Meptid (mild pain killing injection) and Pethidine (strong pain killing injection) are all available. If you require stronger pain relief like an Epidural the midwife will transfer your care to the Maternity team.

In normal labour there will be no artificial breaking of the waters (ARM) unless indicated or at your request.

If your labour does not progress normally, then the midwife will consult with the Maternity team. We aim to achieve a safe birth of your baby and ensure that you are well.

Can I use the birthing pool?

You may choose to use the pool for pain relief and also for giving birth to your baby. We have midwives that are skilled in delivering women in water.

Who will be present for the labour and birth?

The midwife will be the main carer for you at this time. If you have agreed to have a student midwife or doctor they may be present with the midwife.

What about the afterbirth (placenta)?

Once your baby is born the afterbirth normally takes up to an hour to separate from the wall of the uterus. If everything is well with both you and your baby the midwife will not clamp the cord until pulsation has ceased. Unless you request no
injection to help deliver the placenta there will be routine use of an injection to help with the afterbirth.

What about stitches?

If you need any stitches a local anaesthetic will be used to take away the discomfort. This will be done by the midwife. Your stitches will dissolve on their own and advice will be given to you on how to keep the area clean and comfortable.

What happens to my baby after birth?

Immediately after the birth, your baby will be placed near your breasts (skin to skin) as this helps your baby keep its breathing and temperature regular. Starting to breastfeed during this time will help establish your milk supply.

We refer to this as “The Golden Hour” where you can enjoy some time together with your baby. Breast feeding is strongly recommended in our Unit and all mothers will receive full support in demand feeding.

Your baby will be weighed, have name labels put on and Vitamin K will be given if you wish. You can dress your baby after this. Please bring in a separate bag with a hat, vest, babygro and nappy in to dress your baby.

After six hours (but before 72 hours) your baby will be fully checked over, either by an especially trained Midwife or Paediatrician. The examination will be explained and if any follow-up appointments are required for your baby these will be given to you. If you have already gone home, don’t worry, you will either be given an appointment to come back to the hospital or a Community Midwife will undertake the newborn examination.
What happens after the birth of my baby?

Your temperature, pulse and blood pressure will be taken and the midwife will make sure that you are not bleeding too much. You will be encouraged to pass urine within an hour of the birth. When the midwife is confident that you have recovered from your birth (generally between two to six hours) she will discharge you home.

Will I transfer to a ward?

You will be transferred to the postnatal ward only if you or your baby requires ongoing care. The midwives and maternity care assistants on the postnatal ward are skilled in providing the support you and your baby will need, including advice on infant feeding, general baby care and caring for babies with additional needs.

Your baby may have a hearing test while in hospital, if not, you will be given an appointment to come back to the Newborn Hearing Centre. This is on the third floor of the Maternity Unit.

Before you go home the Midwife will discuss with you:

- Registering your baby’s birth
- Community Midwifery Service
- Newborn Blood Spots Screening tests
- Postnatal check-up with your General Practitioner at 6 weeks
- Contraception,
- Cot death prevention
- Postnatal exercises
- Transfer to the Health Visiting Team
- Telephone numbers where you can contact the Hospital for any advice 24/7.

You will also be given your Red Book (which contains all the developmental information about your baby) and the Birth to Five Book which is your complete guide to looking after your baby during the first five years of life.
What happens after I return home?

A Community midwife will visit you at home the day after your discharge from hospital and will discuss with you the frequency of your visits. There will be an opportunity in the future to see your midwife at a Children’s Centre. The Community Midwife or Midwifery Assistant will visit on the 5th day to weigh the baby and take some of your baby’s blood to test for certain conditions. On the 10th day the Community Midwife will discharge to the care of the Health Visitor who will look after the developmental needs of your baby.

Contact phone numbers will be given to you on discharge so if any problems arise you can speak to a midwife.