

Ayrshire Maternity Unit  
University Hospital  
Crosshouse  
Kilmarnock KA2 0BE  
Telephone: 01563 521133





# Maternity services guide 2024




## Information for you

 Follow us on Twitter @NHSaaa

 Find us on Facebook at [www.facebook.com/nhsaaa](http://www.facebook.com/nhsaaa)

 Visit our website: [www.nhsaaa.net](http://www.nhsaaa.net)

 All our publications are available in other formats



SCAN ME

## Contents

Introduction	Page 3
Care in pregnancy	Page 8
Antenatal care – Maternity Unit	Page 19
Labour and birth	Page 22
Postnatal care	Page 31
General information	Page 42
Useful telephone numbers	Page 51

## Introduction

We welcome you to maternity services and hope you will find your pregnancy and birth an enjoyable experience. With your help, we aim to provide a programme of care to meet your individual needs.

We use an electronic maternity record called BadgerNet. In line with national guidance you will have access to your maternity notes. You will be able to download the Badgernet app to your smartphone. You should also have access to patient information leaflets, investigation results and your birth plan. For further help using Badger Notes, [click here to see frequently asked questions](#). If you don't have access to a smart phone we will print a copy of any documentation you need.

Within NHS Ayrshire & Arran we offer a comprehensive, integrated maternity service within the hospital and community settings. You will be supported to make an informed choice as to where you will have your baby.

The Ayrshire Maternity Unit (AMU) is a purpose-built unit linked to University Hospital Crosshouse. The unit has an early pregnancy assessment suite (EPAS), maternity assessment unit, maternity day care unit, ultrasound department, labour suite, maternity theatre suite, midwifery suite, inpatient ward and neonatal unit (NNU) as well as a pelvic health physiotherapy team.

Maternity services throughout Ayrshire and Arran are co-ordinated from Ayrshire Maternity Unit. The midwives on Arran provide a separate information leaflet detailing how the service works on the island and how it links to AMU. This booklet has been produced for your guidance and we hope you will find the information useful. Please do not hesitate to let us know how we can help you while you are in our care. If you have any questions or requirements regarding your care, please speak to your midwife. You should also read your 'Ready Steady Baby' book, as it gives lots of helpful information.

## COVID-19

Some services may be subject to change due to COVID-19. This includes guidelines around visiting. Your community midwife and the maternity unit staff will advise as needed.

Please note that you will need to follow current COVID-19 guidance while in the healthcare setting.

## Teaching students

The hospital provides valuable clinical training to midwifery, medical and allied health professional students as part of their university courses. If you would rather students were not present, please speak to your doctor or midwife. This will not affect the care you receive.

## Quality standards

NHS Ayrshire & Arran aims to deliver the highest quality of healthcare services to the people of Ayrshire and Arran. The Healthcare Quality Strategy for NHS Scotland (May 2010) details the three quality ambitions:

- safe
- person-centred
- effective

These provide the focus for everything we do in our aim to deliver the best quality healthcare.

## Improving the patient experience

We are committed to ensuring that all of our mothers and their families have a positive experience. We are part of the Maternity and Children's Quality Improvement

Collaborative (MCQIC), a national initiative which aims to ensure that the care women and babies receive is the safest possible. In addition, it aims to improve women's satisfaction with maternity services.

Giving your child the best possible start in life is a priority. In line with the Scottish Government's 'Getting it Right for Every Child' (GIRFEC) and Early Years policy, we work to support parents, in partnership with other agencies, to ensure that the outcomes for all children improve.

This starts in pregnancy with the midwife usually being the named person to ensure continuity and seamless care throughout the pregnancy journey. After your baby is born the care is transferred to the health visitor or family nurse.

Following the publication in January 2017 of the Best Start: A Five Year Forward Plan for Maternity and Neonatal Care in Scotland, our services have been under review and development and some changes may continue to take place during your pregnancy. Rest assured these are in line with Scottish Government guidance and improving services.

<http://www.gov.scot/Publications/2017/01/7728/2>

## **Facilities for people with special needs: Making care more accessible**

If you have a special need and require assistance of any kind when attending the department, please tell your midwife who will make the necessary arrangements.

### **Parking and wheelchairs**

There are disabled parking spaces at the main entrance of the maternity unit and wheelchairs are located through the main reception and outside the labour ward. The appropriate badge must be displayed on cars parked in disabled parking bays at all times.

### **Hearing loop system**

We have a hearing loop system throughout the maternity unit.

To ensure privacy during your consultation with medical staff, we can provide personal communication devices for patients who are hard of hearing.

### **Hand washing**

Hand washing is very important in helping to prevent or spread infection. We ask that all visitors to the unit take the opportunity to wash their hands or apply alcohol gel.

## Toilets

Toilet facilities are sign-posted in the unit. These are located on both the lower and upper floors and are designed for wheelchair access.

## Lift

There is a lift available near the front of the maternity building which is for public use

## Disability requirements

If you or your partner have a disability or complex special need that requires you to bring specialist equipment into hospital, please discuss this with your midwife.

## Interpreter services and sign language

If you require the services of a language interpreter or a British Sign Language interpreter to help during consultations with your doctor or midwife, please ensure that you tell your midwife.

## Care in your pregnancy

In NHS Ayrshire & Arran, we base our maternity care on the NHS Quality Improvement Scotland Pathway



for Maternity Care (SEHD 2009). You can find details by visiting: [Keeping childbirth natural & dynamic \(healthcareimprovementscotland.org\)](https://www.healthcareimprovementscotland.org)

The principles of the pathway are that pregnancy and childbirth are normal body processes and unnecessary intervention should be avoided.

## Here are the different pathways we follow:

**Green pathway:** Healthy women with uncomplicated pregnancies should be offered a midwife as their lead professional, being the first point of contact to confirm, book, assess and plan care.

**Amber pathway:** Women with any potential medical, obstetric or social risk factors should be further assessed by the appropriate health professional. Following assessment women will be allocated to either the green pathway or red pathway.

**Red pathway:** Women with significant medical or obstetric factors should have a consultant obstetrician as the lead professional, sharing care with midwives, family doctors (GP) and other care providers as appropriate – for example, anaesthetists, diabetologists, cardiologists, neonatologists, psychiatrists, allied health professionals (AHP) and the Paediatric Supportive Care Team.

Your midwife will carry out a risk assessment when you first meet and will discuss which pathway is recommended for you, this is usually by telephone and is known as the booking appointment.

During this call your midwife will ask to speak to you on your own at certain times during the conversation.

This will give her the opportunity to discuss some issues or experiences that you may find difficult to discuss with your partner present. Partners are welcome to attend all antenatal appointments.

Sometimes women on the green pathway will transfer to red if needs change during pregnancy, labour or after birth, or the other way round.

## Your options for birth

You have the right to give birth in the place of your choice. However, we recommend that women on the red pathway have their babies in our consultant-led unit under the care of the maternity team. If you are advised not to give birth in the place you choose, ask your consultant or midwife to explain the reasons for this. We will support your informed choice wherever possible.

Women who have previously had a baby by caesarean

section will be offered a vaginal birth after caesarean section (VBAC) clinic session to provide an additional opportunity to discuss options for birth.

## **Additional support in pregnancy**

While pregnancy is an exciting time in your life we recognise that you may be experiencing additional life stresses that impact on the overall wellbeing of you and your baby. The Safeguarding Midwifery Team are a team of midwives who are trained to support women and their families with a variety of challenges to ensure the best outcome for you, your baby and other children in your family.

There are many circumstances that your community midwife might identify an additional support need for your family. Some examples might be if you or your partner are living with alcohol or substance misuse, have significant mental ill health, severe learning disability, domestic abuse or have worked with criminal justice or social services your community midwife will discuss this with you and refer you to The Safeguarding Midwifery Team.

The Safeguarding Midwife will arrange to meet with you to understand how these factors impact on your life and work together to ensure you have access to all the

support you need. We will provide care that is individual to your needs and support to prepare for the arrival of your baby.

## Birth reflections

Although it is not common, some women do have a distinct fear of childbirth. It is important that you have the opportunity to discuss any concerns you may have as early in pregnancy as possible. If you think this may affect you, speak to your community midwife. If after discussion with your community midwife additional support is required she will refer you to our Birth Reflections service.

## The Maternity and Neonatal Psychological Interventions (MNPI) Service

In NHS Ayrshire & Arran we have a Maternity and Neonatal Psychology Interventions Service to help support you to cope with difficult news or difficult experiences in pregnancy, labour, or postnatally. The Maternity and Neonatal Psychological Interventions (MNPI) Service covers Ayrshire Maternity Unit and the Neonatal Unit.

<https://www.nhsaaa.net/services-a-z/maternity-and-neonatal-psychological-interventions-mnpi/>

## Perinatal Mental Health Service

The perinatal mental health service is a multidisciplinary team of psychiatrists, mental health nurses, occupational therapists and psychologists, who provide specialist care to women across Ayrshire and Arran. We work with women who wish to start a family but are at risk of becoming severely mentally unwell. We also treat women who are pregnant or in the post-natal period and who have a severe mental illness or are at high risk of becoming severely unwell.

<https://www.nhs.uk/services-a-to-z/perinatal-mental-health-service/>

## Covid-19 vaccination in pregnancy

Although the overall risk from COVID-19 in pregnant women and their new babies is low, in later pregnancy some women may become seriously unwell and need hospital treatment. This is why it is important that pregnant women have their vaccination as soon as they are invited as it offers the best protection.

Both the Royal College of Obstetricians and Gynaecologists (RCOG) and Royal College of Midwives (RCM) have a decision guide and other information you may find helpful on COVID-19 vaccines and pregnancy.

## Flu vaccination

Pregnant women are known to be at increased risk from the complications of flu, and so we recommend vaccination for all pregnant women. Flu vaccination is safe in pregnancy and having the vaccine could help you to avoid catching the flu and could help to protect your baby. Studies have shown that vaccination during pregnancy can continue to provide protection against flu to babies after they are born, and for their first few months of life. Flu vaccination is carried out between October and March each year. Pregnant women who wish to get the flu vaccine are advised to discuss with their community midwife or contact the Maternity Assessment Unit to arrange an appointment.

## Pertussis vaccination

Scotland, like the rest of the UK, has experienced a large national outbreak of pertussis (whooping cough) in recent years. Young infants are at highest risk of complications and death from *Bordetella pertussis* infection. To protect young infants in the first few weeks of life we offer pertussis vaccination to all pregnant women from 16 weeks gestation. The vaccination is most effective between 16 and 32 weeks however you can have it at any time.

## Deciding how to feed your baby

It's up to you. Breastfeeding is recommended for a number of reasons. You can find out more in 'Off to a Good Start'

[Off to a good start: all you need to know about breastfeeding - Publications - Public Health Scotland](#)

Everyone is different, so choose what's right for you and your baby. You will be supported to feed your baby safely whatever you decide.

Both Ayrshire Maternity Unit and Arran War Memorial Hospital have Baby Friendly accreditation. This means that mothers can expect best-practice standards of care in relation to infant feeding.



## Feeling well during pregnancy

Looking after yourself while you are pregnant and taking time to relax can help your baby grow and develop.

Sometimes it is difficult to avoid being stressed or busy. Exercise is one way to stay healthy in pregnancy. Regular exercise is good for you and your baby. Swimming and walking are good activities. Avoid contact sports and don't take up anything new during pregnancy. Gradually reduce the amount of exercise you do as your pregnancy progresses. If you have exercised prior to becoming pregnant, then you should discuss with your fitness instructor if it is suitable for you to continue.

## Physiotherapy

- Early Pregnancy Class (12- 20 weeks)

We recommend you attend the early pregnancy class to find out how to look after your body as it changes. Participate in appropriate exercise to help keep you fit for pregnancy and prevent problems developing.

- Pelvic Girdle Pain Group

Should you develop pregnancy related pelvic girdle pain / back pain, this class offers advice and support to help you manage this pain. The class will include exercise, relaxation and coping mechanisms.



- Post Natal Shape - Up Class

Information on this class can be found at end of booklet

You can self-refer via AMU reception (telephone number at end of booklet)

You can also use the link below where you will find further information. It is free to download and print

[https://thepogp.co.uk/userfiles/pages/files/POGP-FFBirth%20\(1\).pdf](https://thepogp.co.uk/userfiles/pages/files/POGP-FFBirth%20(1).pdf)

**Remember to talk to your midwife if you have any questions.**

## Smoking

Smoking is hazardous to health, particularly in pregnancy, and interferes with the growth and development of your baby.



We offer all women carbon monoxide (CO) monitoring at their first midwife appointment. Carbon monoxide is a poisonous gas which you cannot see or smell and it can be harmful to your developing baby. It is given off through cigarette

smoke, faulty gas appliances and car exhausts. If you are a smoker or have a raised CO level, we will refer you to the Quit your way service for advice on smoking cessation and/or advice on second hand smoke. We can give help and support to women who wish to stop smoking. If you smoke, we strongly advise you to take up this offer with your hospital or community midwife.

## Alcohol and pregnancy: the facts

If you are pregnant it is important to remember that drinking alcohol while pregnant can put your baby at risk. It is unknown if there is a safe amount of alcohol that you can drink when you are pregnant. However, we do know that even small amounts of alcohol cross over the placenta into your baby's circulation and may cause harm. When you are pregnant or planning a pregnancy, your midwife will recommend that no alcohol is the safest choice.

### **No alcohol, no risk.**

The Chief Medical Officers' guideline states that:

If you are pregnant or planning a pregnancy, the safest approach is not to drink alcohol at all, to keep risks to your baby to a minimum.

Drinking in pregnancy can lead to long term harm to your baby, with the more you drink, the greater the risk.

## Maternity Unit - Antenatal care

### Ultrasound scans

We offer an ultrasound scan at the booking visit with a further detailed scan between 18 weeks and 20+6 days of pregnancy. You are welcome to bring one adult person with you. We are unable to accommodate children during ultrasound scans. We can provide keepsake photographs of your baby for your photograph album. This service is supported by donations.

### Antenatal education classes

Classes are held both in the hospital and within the community. Your options will be discussed at the booking clinic. Your midwife will provide you with information to help you make informed choices regarding your pregnancy, birth and post-natal care.

### Early Pregnancy Assessment Suite (EPAS)

This is an emergency triage unit for pregnancy complications under 17 weeks gestation. Reviews are by appointment only and can be arranged by self-referral or by health professionals.

The unit is situated on the first floor of the Maternity Unit, enter via the Maternity Unit main entrance. We have a comfortable but small waiting area. One other adult may accompany you to the unit. Due to the sensitive nature of the unit please make alternative arrangements for the care of any children.

Due to the nature of EPAS, emergencies may arise delaying appointments. On average please allow approximately 2 hours for your appointment.

## **Maternity assessment**

This unit provides urgent midwifery advice, triage and assessment, 24 hours per day, all year round.

We are here to support you should you have concerns about your pregnancy or wellbeing of your baby. We also provide emergency advice and care for those who have recently had a baby.

The midwife will be able to give advice, contact your midwife or arrange a hospital assessment. You may be asked to attend the unit for assessment.

We are situated on the ground floor of the Maternity Unit, enter via the Maternity Unit main entrance from 7am to 10pm.

From 10pm until 7am admission to the unit is by the labour suite entrance situated at the rear of the building. This is clearly signposted.

One adult may accompany you to the unit. You will need to make alternative arrangements for the care of other children as needed.

To contact the unit please telephone. We are always happy to take your call.

## Maternity day care

Maternity day care provides care for women who require closer monitoring during their pregnancy.

It is situated in the Pink Zone of University Hospital Crosshouse and can be accessed in the following ways:-

- Via the main hospital entrance (at the bus stop) following the signs to the Pink Zone
- Behind the Maternity Unit next to Day Surgery/ Endoscopy
- Via the door at the Renal Unit (door behind yellow pillar to the left hand side of the emergency department (ED))

As well as routine maternity day care appointments there are various clinics provided within the unit including Diabetes, Glucose Tolerance, Medical Obstetric, Multiples and Anaesthetic. In addition, other services include Community Midwife appointments and some ultrasound scanning.

One adult may accompany you to the unit. You will need to make alternative arrangements for the care of other children as needed.

## **Labour and birth**

### **Important points for women in labour**

Early labour is best spent at home, relaxing, eating and drinking normally. Don't come in to hospital too early unless we have advised you to. If your waters have broken please phone Maternity Assessment. Use this time to relax by watching television, walking, light housework or a warm bath. This helps to pass the time before labour is established. If you are unsure whether to come in or not please don't hesitate to phone the Maternity Assessment Unit for advice. You may be advised to come in for further assessment or you may be advised it is safe to stay home. Your midwife will always check you are happy with the outcome of the call and if/

when she would like you to call back. She will also check with you where you are planning to have your baby.

Research shows staying at home during this time allows for more adequate rest periods, reduces your stress levels and improves mobility. It means you have access to your own comforts and can eat and drink things of your own choice and preferences, all of which encourage labour to establish spontaneously and more naturally than the hospital environment. This has been shown to reduce the need for further interventions during the labour period.

Once you are in established labour, being mobile during labour has been shown to reduce the need for pain relief. It also helps your baby get into the best position for birth and is linked to a shorter labour. If you feel tired lie down and rest for a while.

It is important that you drink as required during labour to avoid becoming dehydrated. Isotonic drinks are ideal and you can drink these whether you are home or in hospital. If you are in early labour, we also encourage you to eat to keep your energy up. In later labour, many women do not want food.

It is important that you try to pass urine regularly during labour. This gives space for your baby to come down the pelvis and reduces the risk of injury to your bladder.

## Giving birth at home

Ayrshire and Arran have a dedicated and passionate home birth team to support women's choices of birthing their baby at home. If you feel this is an option you would like to explore you can request this when calling to arrange your first booking appointment, or at any stage throughout your pregnancy by asking your community midwife to refer you to the team. If you prefer you can also email the team directly at [clinical\\_homebirth\\_team@aapct.scot.nhs.uk](mailto:clinical_homebirth_team@aapct.scot.nhs.uk).

The Homebirth team aim to provide continuity of care where the majority of your care will be with your named midwife where possible or buddy midwife throughout pregnancy and postnatal period, and with the majority of your appointments carried out at home. This has shown to improve pregnancy and birth experiences. Your named midwife is part of an on call rota with the rest of the homebirth team to ensure a member of the team are available to attend when you go into labour. The homebirth team midwife will call the wider community team when required for a second midwife to be in attendance for your labour and birth.

The team offer hypnobirthing classes, aromatherapy, and acupuncture and are experienced in biomechanics for birth, all to help minimise intervention and requirement



for strong pain relief. There are regular online sessions so you can talk to other parents that have birthed their baby at home recently and also get to know all the midwives in the team and ask any questions. Home birth has become more popular in the last few years in Ayrshire with women now realising this is a viable and supported option.

Although it is rarely necessary you may be advised to transfer to hospital prior to or during labour. The midwives will monitor you and your baby and will discuss any concerns they may have with you. Birthing at home has proved to be a safe option for women with no problems during pregnancy, if you require extra care in pregnancy but still wish to explore this option you will have the opportunity to discuss this further with your midwife and obstetrician.

## **Admission in labour**

When you attend Maternity Assessment Unit you will be seen by a doctor or midwife. If you are confirmed to be in established labour they will carry out a full risk assessment and discuss your preferences with you. They will take into consideration the wellbeing of both you and your baby, your birth preferences and if you wish any type of pain relief. This will determine whether

Labour Ward or Midwifery Suite would best suit your needs at this time. These units are located at the rear of the hospital, side by side on the ground floor.

Your birth partner can attend Maternity Assessment with you. If you wish, you can have an additional support person with you in Labour Ward/Midwifery Suite. It should be noted that one of your support partners may be asked to leave for a while during examinations or procedures such as setting up an epidural to provide more available space in the room.

## Midwifery-led care

The midwifery suite is designed to care for women in low risk labour. Care here is undertaken with a midwife being the lead care provider. It aims to provide a more homely, quiet and relaxing space to birth your baby. We can offer a variety of seating options or resting aids to allow you to feel more comfortable throughout your labour and birth. These can help to maintain mobility and aid upright positions that are shown to reduce time in labour and the need for strong pain relief.

We provide some minimally invasive and natural ways to reduce pain and discomfort throughout labour and birth. Such as;

- **Birth pool.** A large static pool that allows free movement and feeling of weightlessness. Please be advised that if you wish to use the pool you should be free of nail polish or fake tan products.
- **Dimmed lighting.** Allows for relaxation and aids production of your own hormones called endorphins that reduce pain.
- **Aromatherapy.** A number of our midwives can provide essential oils for massage or inhalation. These can aid relaxation and even reduce pain.
- **TENS machines.** Transcutaneous electrical nerve stimulation is the use of a small electric current produced by a device to stimulate the nerves to reduce pain.
- **Hypnotherapy.** We have Bluetooth speakers available for those who have learned how to use hypnosis during pregnancy.
- **Certain drugs** such as Entonox 'gas and air' and morphine are available as required

If you require specialist care due to labour complications or certain forms of pain relief, you would then be transferred to the labour suite.

## Consultant-led labour suite

Some women and their babies do require the specialist care of an obstetrician, anaesthetist or paediatrician due to pre-existing medical conditions or complications of pregnancy. Care will be provided within this unit. We recommend that you discuss your needs and wishes with your midwife and consultant before the birth.

You can drink isotonic drinks in the consultant-led labour suite, unless you are having a caesarean section shortly. However, we advise some women not to eat during labour.

We recommend labouring using upright positions and avoiding long periods lying down. However, women having an epidural, induced labour or if continuous heart rate monitoring for your baby has been recommended may find mobility significantly reduced. Ask your midwife if it is possible for you to spend some time out of bed given your own individual circumstances. If you have to be cared for in bed, please try to be as active as possible and avoid semi-sitting for long periods: being on your side or kneeling over the back of the bed are better labour and birth positions.

We aim to make the environment as relaxing as possible and can incorporate many of the pain relief methods

used in Midwifery Suite care to help you be more comfortable during your stay.

## Induction of labour

Some women may need to have labour started (induced). There are a number of ways that this can be carried out, including vaginal pessaries, breaking of the waters and an intravenous drip. All of these methods are intended to bring on contractions and a combination of these may be required. Further information will be provided by your midwife or obstetrician in addition to being given a patient information leaflet.

## Elective caesarean and theatre

Women having their baby by elective (planned) caesarean section will be given the opportunity to attend a pre-operative preparation appointment. This is known as the Enhanced Recovery Class which provides information about your proposed surgery and helpful suggestions to aid a quicker recovery. You will receive an email with this appointment inviting you to join this online class. Your doctor and midwife will ensure you have a pre-operative assessment and a plan for your bloods to be taken prior to your admission.

Some women may require a caesarean section as an emergency (unplanned) due to health, pregnancy or labour complications. We have a specialist team available should this need arise at any stage. You will receive individual advice on care and recovery at the time.

## What to bring to hospital with you

For information about what to bring into hospital please see your 'Ready, Steady Baby' book. Space is very limited, so please do not bring in to hospital more than you need. **Remember to bring in a pen to help you complete your baby's feeding charts.**

## Medicines

Please bring all current medicines (excluding simple painkillers) with you if being admitted to hospital. We will return these to you when you are discharged.

## Transfer to another unit for delivery

If your baby is very preterm or needs specialist neonatal care, you may be transferred to another hospital before delivery. This is in line with Scottish Government policy and we will discuss this with you at the time. If it is not possible to transfer you before delivery, your baby may

need to be transferred after he/she is born. Again, we will discuss this with you and we would aim to transfer you to the same hospital as soon as possible so that you can be near your baby.

## Bereaved parents

A rare but sad situation can arise as the outcome of a pregnancy. Within the labour suite, a family room is available for bereaved parents. This room provides facilities for parents and other members of the family to be together at this time. The Paediatric Supportive Care Team may also be involved in your care.

## Postnatal care

### Skin to skin contact

Wherever your baby is born you will be encouraged to have skin to skin contact as soon as possible. Skin to skin has many benefits for you and your baby including:

- Calms and relaxes both you and your baby
- Regulates your baby's heart rate and breathing, helping to better adapt to life outside the womb
- Stimulates digestion and an interest in feeding
- Regulates temperature

- Enables colonisation. This is when the baby's skin has contact with the mother's friendly bacteria, providing protection against infection
- Stimulates the release of hormones to support breastfeeding and mothering

Skin to skin can last for as long as you like. It is recommended to continue for at least one hour post birth until the baby's first feed, either at the breast or with formula.

## Inpatient ward

Mothers and babies who cannot be transferred home within a six to 24 hour period following the birth, are transferred to the inpatient ward. Accommodation in the ward and length of stay are determined according to the clinical needs of each mother and baby. Most mothers and babies are transferred home by the second day after birth.

We advise you to have a supply of simple pain killers, for example Paracetamol, Ibuprofen already at home as this will help to speed up the discharge process for you.

Midwifery staff will discuss and plan your care with you and will liaise with others involved in your care as needed. A full range of support services, including



physiotherapists, dietitians and social workers, are available to help you if required.

## Partners staying overnight

There is limited accommodation which may be available for your partner to stay overnight for additional support during the early postnatal period.

Key information includes:

- The need to provide own meals and refreshments, as hospital meals are for patients only.
- We will provide a fold down bed/recliner where possible as hospital beds are for patients use.
- Partners should be respectful of other mothers, babies and staff on the ward.
- Further guidance/information may be obtained from your Midwife.

We have a limited number of family rooms which may be available to women whose baby remains in the neonatal unit.

If there are extenuating circumstances partners may be able to stay as well.

## Security

Your baby will stay by your bedside during the day and at night. If you wish to leave the ward for any reason, you should always tell the midwife on duty. Never leave your baby in the care of anyone you do not know or cannot identify. All staff wear identity badges and a teddy bear emblem will be displayed on badges for those staff authorised to handle a baby in the course of their duties.

If you have any concerns at all about a person's identity, please ring the nurse call bell for assistance. Access to all wards and departments is through a door entry system for visitors. A closed circuit television system has been installed within the maternity unit to improve security.

While in hospital, your baby must wear two identification bracelets at all times, and the name on the bracelet must be the same as the name on your own identification bracelet. The identification bracelets and cot name card will be checked daily by the staff. If you notice that a bracelet is either loose or missing at any time, please inform the staff so that it can be immediately replaced.

We recognise that the birth of a baby is a family event, and you will have many relatives and friends who will want to see the new addition to the family. To help us make the unit more secure, please ask your visitors to

observe visiting times and to note that there is a limit of two visitors to a bed at any one time, in addition to partners.

## Infant feeding team

It is never too early to start thinking about how you are going to feed your baby, but you do not have to make a decision until your baby is born.

NHS Ayrshire & Arran, Integrated infant feeding team - maternity and health visiting service, peer supporters from the Breastfeeding Network. This team is dedicated to supporting mothers of new-born babies in a way that reflects their individual experiences and needs and support will also be available for mums and babies admitted to the neonatal unit.

Feeding support by the maternity infant feeding team is provided seven days per week 8.30 am until 4pm.

## Caesarean section birth / sick / premature baby

There can be challenges for women if baby was born by Caesarean section and/or if baby is sick or premature to give their baby breastmilk, however with support, you can still breastfeed.

Breastfeeding is the preferred method of feeding infants including the preterm and hospitalised infant. Breastmilk provides the proper balance of nutrients and transfers immune factors to protect the infant in early life.

If it is not possible for an infant to breastfeed in hospital due to prematurity, infant or maternal ill health or maternal wishes, you will be supported to express breast milk.

**Ayrshire Bairns app** - download NHS Ayrshire & Arran App by searching for it in your Apple or Android mobile App store. Then search for "Ayrshire Bairns"

## The Breastfeeding Network

The Breastfeeding Network (BfN) is a registered charity which offers an independent source of information and support for breastfeeding women and their families.

In Ayrshire, the BfN offers:

- friendly drop-in breastfeeding centres across Ayrshire which provide information about feeding your baby, on-going support and a place to meet other pregnant and breastfeeding mums.

To find out more please text or call 07528 104976 or visit the BfN website: [www.breastfeedingnetwork.org.uk](http://www.breastfeedingnetwork.org.uk)

## Post pregnancy contraception

There are many very effective and safe methods of contraception that are ideal for people who have just had a baby and want to space their pregnancies or have long term contraception. Many can also be used while breastfeeding. Your midwife or doctor will discuss contraception with you during one of your antenatal visits (usually around 20 to 24 weeks of pregnancy).

### [NHS Postnatal Contraception - YouTube](#)

Staff in the hospital, or community, will make sure you can get your chosen method easily and quickly, to allow you to start it as soon as you have your baby.

The need for contraception returns again as soon as 3 weeks after your baby is born, so ideally starting the sooner the better is best.

If you have had a form of intrauterine contraception after having a baby you need to have a check-up at around 4-6 weeks to make sure the coil threads can be seen, and to trim them if needed. There may be a slightly higher chance of the coil becoming expelled as your womb returns to its non-pregnant size. Most women will be aware if this happens.

## Before going home

Every baby is checked for important medical conditions and receives a hearing screening test before discharge. Further important blood tests are carried out by your community midwife. For further details, please refer to your 'Ready Steady Baby' book or speak to your midwife.

## Going home

When you are discharged, a member of staff will accompany you to the ward door. If travelling home by car, it is your responsibility to fit a car seat suitable for your car and baby into the car before you go home.

## Neonatal unit (NNU)

The neonatal unit (NNU) provides specialist family integrated care for premature and sick babies. It is a relaxed, friendly unit. Parents are encouraged to spend

as much time as they like with their babies and are actively encouraged to take part in the planning and delivery of their care. A waiting area and small play area is available for use by parents, grandparents and other visitors. It is the responsibility of all parents to ensure that children are adequately supervised if using this area. Siblings are encouraged to accompany parents when they visit.

Cold drinks are available at all times. During the afternoon and evening, parents may bring one extra visitor to accompany them. A parent must always accompany visitors to the unit. Three visitors may visit the cot side at any one time.

If you wish to discuss any issues within the NNU, please speak to the nurse or midwife caring for your baby, or ask to speak to the neonatal unit co-ordinator. Parents have access to medical staff at all times, and you can make an appointment to speak with a consultant paediatrician.

The unit has a very strict handwashing policy. We ask that all visitors, staff and parents wash their hands on entering the NNU.

## Community care

Following transfer home from hospital, your community midwife will visit the following day, and will discuss and plan your care with you. If your midwife does not visit before 4pm please call maternity assessment to speak to a midwife who will offer advice and support. Your community midwife will care for you until your baby is ten days old.

The care for you and your baby will be handed over to the named health visitor at day ten. Each child has a named health visitor and your named health visitor will be in touch with you to arrange a home visit to see you and your baby between day 11 and 14. The health visiting service offer a home visiting service in the first few months of your baby's life and your health visitor will discuss this with you at the first visit. You will have a named health visitor until your baby reaches school age.

The health visiting service will monitor and assess your child's growth, development and wellbeing. Your health visitor can give evidence-based and expert advice on many topics, including feeding your baby, weaning onto solids, play, parenting, immunisations and your own health and wellbeing.

If you have a family nurse as part of the Family Nurse Partnership programme you will continue to receive



support from them until your child is two, when your care will be handed over to a named Health Visitor.

If you wish to discuss your birth after you have gone home from hospital, please speak to your community midwife or health visitor. They will help you to put you in touch with the most appropriate person to answer your questions.

## Postnatal shape-up class

There is a postnatal shape – up class for all mums from when your baby is six weeks old for four consecutive classes. The class is provided by the Pelvic Health Physiotherapy Team.

The class teaches specific exercises for both core strength and pelvic floor. You can also discuss posture and positioning, as well as relaxation. You can bring your baby along to the class.

You will find further information in the postnatal leaflet “Fit for Motherhood”, which is available on the BadgerNet app.

You can also find information by following this link to another publication which is free to download and print [https://thepogp.co.uk/userfiles/pages/files/resources/211721pogpfffuture signed off.pdf](https://thepogp.co.uk/userfiles/pages/files/resources/211721pogpfffuture_signed_off.pdf)

To book a place please telephone AMU reception.

## General information

### Visiting

#### Inpatient ward

There is flexibility for visiting throughout the day and following feedback from women and their families we ask visitors to respect the visiting times noted below to help with family bonding time.

#### Visiting times:

10am – 2pm:	Partner or named visitor
2pm – 4.30pm:	General visiting
4.30 pm – 5.30pm:	Partner or named visitor and siblings
5.30pm – 8pm:	General visiting
8pm – 9pm:	Partner or named visitor

Please ask your visitors to wait patiently for admission to the ward area at the designated visiting hours. Buzzing before visiting times takes staff away from providing direct care to you and your baby.

For details of visiting hours in other departments, you should check with the midwife in charge, as visiting may be limited to birth partner only.

If any of your family or friends are unwell, are suffering from a heavy cold or any other infectious illness, they should not visit the hospital. All visitors should wash their hands before touching your baby, and you should continue this practice when you go home.

To ensure the security of the building, the main entrance doors are locked at 10pm each evening by the porter. As an additional measure, patients and resident partners cannot enter or exit the building after this time.

## Public transport

There is a regular bus service which stops at University Hospital Crosshouse main entrance. Information on public transport is available on our website [www.nhsaaa.net](http://www.nhsaaa.net).

## Car parking: drop off and pick up zone

The purpose of this area is to enable drivers to drop off women attending for assessment, admission or who are in labour between the hours of 7am and 10pm. It is also where mothers and babies can be collected when

discharged from hospital. There is a maximum stay time of 20 minutes. Stays longer than this will incur a fixed parking fine from Ayrshire Roads Alliance.

## **Brambles Café**

Brambles Café is open Monday to Friday. Refreshments and a selection of light snacks are available to purchase. Vending machines are available out with opening hours within the sitting area. Canteen facilities in University Hospital Crosshouse are also open to visitors.

## **Parent and child room**

Child-changing facilities and separate feeding room are provided in the upper floor next to Brambles Café.

## **Mobile phones**

The use of mobile phones is discouraged within the maternity unit building. Mobile phones may affect patient monitoring equipment and can be disruptive to other service users. Should you choose to film then please restrict this to your baby and immediate family with the sound feature not in use. Please be considerate of others.

## Patientline

Patientline provides communication and entertainment facilities to your bedside including telephone, TV, radio, internet and a selection of games. There is a cost to use this service.

If you choose not to use Patientline, there is a coin-operated public phone available within the main entrance area.

## Smoking

Smoking is not allowed within the hospital grounds.

In addition as of 5 September 2022, the Scottish Government has introduced a law that makes it an offence to smoke within 15 metres of an NHS hospital building. This includes awning, canopies or any other over hanging structure, even if they are further than 15 metres from a hospital building. Anyone found to be smoking within the no smoking perimeter will be asked to stop right away. Please do so and remain courteous to those reminding you of the no-smoking law. The no smoking law benefits everyone by keeping hospitals free from health-harming hazards.

Before leaving the maternity unit to smoke, we will ask you to sign a disclaimer form. Please note there is no

access from the building overnight after 10pm for the purpose of smoking.

Please advise your visitors of the information above around smoking.

## Chaplains

The unit is visited by chaplains from various denominations. They are available at any time if a special visit is requested.

Your own spiritual advisor is also welcome to visit.

## Valuables

Please do not bring large amounts of money or valuables into hospital. If you are unable to leave them at home please hand them to the midwife, who will arrange for their safe keeping and provide you with a receipt.

NHS Ayrshire & Arran cannot accept responsibility for the personal property and valuables of patients unless they are handed in for safe keeping and an official receipt obtained.

## Lost property

All lost property is handed in to the Security Office, where a register is kept of all items handed in. Any property still unclaimed after one week is passed on to the local police.

## Travelling expenses

If you are receiving Income Support, income-based Job Seeker Allowance, income-based Employment Support Allowance, and Universal Credit or have HC2 or HC3 certificates, and did not travel to hospital by ambulance, you can claim a refund of your travel fares. If you receive Family Tax Credit you may be entitled to a refund of your travel fares.

You will be required to present your award letter from the Department of Work and Pensions to confirm this, as well as provide any bus and train ticket receipts if applicable.

We can also reimburse any claims made under the Young Persons Family Fund.

## Registration of birth

All babies must be registered within 21 days. Details of how to register your baby's birth is provided on the

birth registration card given to you by the midwife after the birth. You may register your baby at your local registration office or at East Ayrshire Council Registration Services, The Burns Monument Centre, Kay Park, Kilmarnock East Ayrshire KA3 7RU, by appointment.

## Donations

We are always pleased to accept financial donations for our endowment funds. These are used to enhance and improve the quality of care within wards and departments.

## Staff charter

NHS Ayrshire & Arran pledges to treat patients with dignity and respect, and staff also have the right to be treated with dignity and respect. Violence in any form, including the use of foul language towards staff, will not be tolerated.

NHS Ayrshire & Arran will support staff who wish to pursue legal action where it is appropriate.

## Enquiries about patients

We realise your family and friends will want to enquire about your progress while you are in hospital. However,



we appreciate if you ask one relative or friend to telephone, then to communicate any news to your family and friends.

Your well-wishers can, of course, use Patientline to contact you directly if you choose to use the facility.

## Your feedback

If you wish to provide feedback, comment, concern or complaint, please speak to any member of staff or ask to speak with the person in charge of the ward or department. They will discuss the matter with you.

You can also ask to speak to the Maternity Unit Coordinator or if the matter remains unresolved, you can contact the Customer Care and complaints department via:

- Telephone: 01292 513620 or freephone 0800 169 1441
- Email: [complaintsteam@aapct.scot.nhs.uk](mailto:complaintsteam@aapct.scot.nhs.uk)
- Write: Customer Care and complaints department  
NHS Ayrshire & Arran, PO Box 13, Eglinton House Ailsa Hospital Dalmellington Road Ayr KA6 6AB

NHS Ayrshire & Arran is working with independent not-for-profit organisations Care Opinion (formerly Patient Opinion). To access the Care Opinion website go to

<http://bit.do/careopinion> for a quick and easy way for you to share your comments about the services we provide.

## Access to health records

The General Data Protection Regulation (GDPR) 2018 Act gives patients the right of access (with certain exemptions) to their health records.

Should you wish access to your record, you must make a formal request in writing.

Application forms and guidelines are available from:

Legal Department

Health Records Department

University Hospital Crosshouse

KA2 0BE

Telephone: 01563 827076

## Medical records and confidentiality

For the purpose of your present and future medical treatment, details of your medical care will be recorded. We may use this information for research purposes and to indicate the kind of health service which patients require.

The information will also be used for purposes of accounting in the NHS. Some information will be processed on a computer.

At all times, we take great care to ensure that high standards of confidentiality are maintained in respect of all information held.

## Electronic whiteboard

A new development within the maternity unit is the use of the electronic whiteboard. The board displays the names of women who are currently in the ward/department. The purpose of this is to aid patient flow and communication between departments. You will be asked for your consent for your name to be displayed on this.

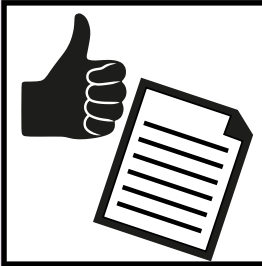
## Useful telephone numbers

- Maternity Assessment Unit: telephone 01563 825300
- Maternity Infant Feeding Team: telephone 01563 825483
- Ayrshire Maternity Unit Reception: telephone 01563 825411

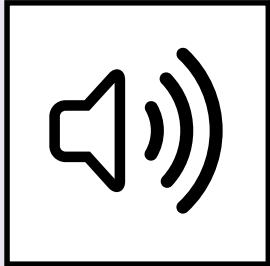
**We are happy to consider requests for this publication in other languages or formats such as large print.**



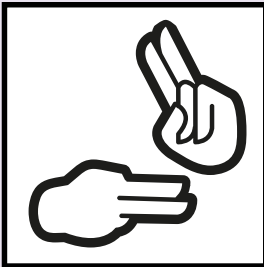
Translations



Easy to read



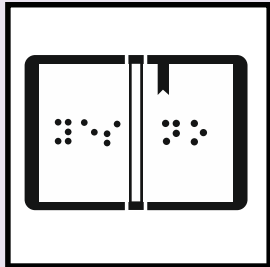
Audio




BSL




Large print



Braille

 **Call: 01563 825856**

 **Email: [pil@aapct.scot.nhs.uk](mailto:pil@aapct.scot.nhs.uk)**



## **Tell us what you think...**

If you would like to comment on any issues raised by this document, please complete this form and return it to our Feedback and Complaints team: PO Box 13, Eglinton House, Ailsa Hospital, Dalmellington Road, Ayr KA6 6AB.

Alternatively, you can call free on **0800 169 1441** or email **[complaintsteam@aapct.scot.nhs.uk](mailto:complaintsteam@aapct.scot.nhs.uk)**

Name

Address

Comment