


# **Community Maternity Care**

## **Information for families**

University Hospitals of Leicester   
NHS Trust



### **Introduction:**

Congratulations - starting a family is a major decision in anyone's life. It is our intention to provide you with the best possible care and support before, during and after your pregnancy.

We'd like you to be fully informed on matters relating to your pregnancy and fully involved when decisions are made about your care.

Antenatal care will be provided principally by your midwife but may also involve other health professionals such as a consultant obstetrician, your GP and your health visitor.

The purpose of this leaflet is to set out how your care will be provided.

## **Visits to the Antenatal Clinics:**

The schedule on the next page is a guide to the antenatal care appointments for women who are healthy and whose pregnancies remain uncomplicated. Women expecting their first baby should attend all the weeks identified.

Women who have had normal pregnancies and deliveries need only attend on the weeks that are ticked ✓.

For women who are identified as requiring additional care, an individual schedule of visits will be arranged.

If you wish to see your midwife / GP before your next appointment then please ring your surgery and make an extra appointment. Extra appointments may also be made at the request of your midwife / GP if complications arise in the pregnancy.

## **The booking appointment:**

At the booking appointment your health and medical history will be assessed and recorded in your own **Pregnancy Health Record**. This will be given to you following your first scan, and you should keep it with you until just after your baby has been born. Please bring it with you each time you come for an antenatal check.

## **Follow up appointments:**

At each visit we will assess both your and your baby's health. This will include a blood pressure and urine check. It is also an opportunity for us to answer any questions or worries you may have. Please remember to bring a urine sample in a clean container.

## Checking your baby's health:

At each visit we will assess your baby's health. This is done by measuring the distance between the top of your womb to your pubic bone. This measurement is then recorded in your Pregnancy Health Record ("Height of uterus"). We will also check the position of the baby from about 36 weeks onwards.



After about 28 weeks you may be able to recognise a regular pattern to your baby's movements. Get used to the number of movements when the baby moves most. If the baby moves less than usual contact your midwife or doctor.

It is not necessary to routinely listen to your baby's heartbeat, but if you would like us to please ask.

## **Schedule of visits:**

<b>8+ weeks</b>	<b>Booking appointment with midwife</b>
✓	Full history taken. Programme of antenatal care explained. Blood pressure, height, weight, Body Mass Index (BMI) recorded. Test urine for protein, send 'mid-stream specimen of urine' (MSU). Arrangements will be made to take booking bloods as soon as possible. Information given on diet, lifestyle changes, pregnancy care services, maternity benefits and screening tests (including the dating scan).
<b>Approximately 2 weeks after booking appointment</b>	
✓	Dating scan.
<b>15 weeks</b>	<b>Monitoring visit with midwife</b>
✓	Screening tests discussed and taken if accepted. Dates must be confirmed via Scan.
<b>17-19 weeks</b>	<b>Review discuss and record</b>
✓	Review results of screening tests. Explain purpose of detailed scan at 20-21 weeks.
<b>25 weeks</b>	<b>Monitoring visit with midwife / GP</b>
	Mat B1 form given. If rhesus negative – explanation of Anti-D injection available at 28 weeks.

<b>28 weeks</b>	<b>Monitoring visit with midwife / GP</b>
✓	Blood test for anaemia (FBC). If Rhesus negative blood test for antibodies and Anti-D injection if accepted.
<b>31 weeks</b>	<b>Monitoring visit with midwife / GP</b>
	Discuss feeding options. Review 28 week blood test results.
<b>34 weeks</b>	<b>Monitoring visit with midwife / GP</b>
✓	Discuss birth plan and feeding options.
<b>36 weeks</b>	<b>Monitoring visit with midwife / GP</b>
✓	Position of baby checked.
<b>38 weeks</b>	<b>Monitoring visit with midwife / GP</b>
✓	
<b>40 weeks</b>	<b>Monitoring visit with midwife</b>
<b>41 weeks</b>	<b>Monitoring visit with midwife</b>
✓	Membrane sweep offered / induction of labour discussed and arranged.

There are three categories of care and depending on your medical history you will be allocated as follows:

**Midwife Led Care:** No medical or previous delivery problems.

**Shared Care:** A medical or previous delivery problem, which requires some specialist advice - you may be seen once by the consultant for his opinion.

**Consultant Led Care:** A pregnancy that requires specialist obstetric supervision - eg: twins. Care is led by the consultant. Some visits may be with your midwife / GP.

Hospital appointments for ultrasound scans to check the baby's progress are routinely offered to date your pregnancy accurately and to check how your baby is developing in more detail at 20-22 weeks.

### **Antenatal clinic times:**

Antenatal clinics are held at your surgery on: .....

### **The Community Midwifery Service:**

You will be cared for by ..... who is a member of the ..... team of midwives. If you have any concerns regarding your pregnancy:

- ⇒ Up to 16 weeks gestation please contact your GP for help and advice.
- ⇒ After 16 weeks contact your midwife at the surgery.

- ⇒ For urgent **messages** only a midwife from your team can be contacted through the community midwives office on 0116 258 4834 (Open Monday – Friday 10.00am – 1.00pm).

### **Antenatal classes:**

There is some provision for antenatal classes. Priority bookings are given to women expecting their first baby. They provide more information on topics such as labour, pain relief, breast-feeding and care of the newborn.

Please speak to your community midwife who will be able to inform you of provision in your area.

### **Delivery:**

The decision on where to have your baby is an important one. You have choices: at home or in hospital.

The Leicestershire hospitals are:

- Leicester Royal Infirmary.
- Leicester General Hospital.
- St Mary's Birth Centre, Melton Mowbray.

Depending on where you live other hospitals may also be appropriate such as Nottingham or Nuneaton. You should discuss your options with your midwife at an early stage.

### **Blood tests during pregnancy:**

Your midwife will give you another booklet entitled '**Tests for You and Your Baby**' which explains all screening and blood

tests available to you, as well as information about ultrasound scans and diagnostic tests.

### **Food advice for pregnancy:**

While you are pregnant, you should eat a healthy balanced diet so that you get enough energy and nutrients for your baby to grow and develop, and for your body to cope with the changes taking place.

Research has shown that taking the vitamin **folic acid** daily during the first 12 weeks of pregnancy may reduce the chance of abnormalities of the baby's spinal cord. Folic acid tablets can be bought over the counter at the chemist without a prescription.

You should avoid eating the following foods because they can contain high levels of **listeria**, a germ that can cause miscarriage, stillbirth or severe illness in a newborn baby:

- Soft, mould-ripened unpasteurised cheese, such as Camembert, Brie and blue-veined cheese such as Stilton. It is safe to eat hard cheeses (such as Cheddar), cottage cheese, processed cheese and yoghurt.
- Pâté (any type including vegetable).
- Uncooked or undercooked ready-prepared meals. Make sure you heat ready-prepared meals until they're piping hot all the way through.

You should also remember to:

- Avoid eating raw eggs or food containing raw or partially cooked eggs. Only eat eggs cooked enough for both the white and yolk to be solid. This is to avoid the risk of **salmonella**.

Wash your hands after handling raw meat, store raw foods separately from ready-to-eat foods and only eat meat that has been well cooked. This is to avoid types of food poisoning such as (**salmonella, campylobacter and E. coli 0157**).

- Wear gloves when you're gardening or changing cat litter and wash your hands afterwards. This is to avoid **toxoplasmosis**, an infection caused by a parasite found in meat, cat faeces and soil. The infection can be harmful to unborn babies.
- You need some vitamin A in you diet but too much could harm an unborn baby. This means you should avoid eating liver and liver products such as pate.
- Avoid eating shark, swordfish and marlin and limit the amount of tuna you eat. You shouldn't eat more than one tuna steak or two medium-size cans of tuna per week. This is because of the mercury contained in these fish, which at high levels can harm a baby's developing nervous system.
- You should avoid oysters and other shellfish (such as prawns) unless they are part of a hot meal and have been thoroughly cooked. This is because, when they are raw, they might be contaminated with harmful bacteria, which are usually killed by cooking.
- You may wish to avoid eating peanuts and foods containing peanuts if there is a family history of peanut allergy as this may reduce the risk of your baby developing a similar allergy.

**Remember, it is important not to smoke during pregnancy, to drink as little alcohol as possible, and to take only medications which have been approved by your GP or midwife.**

## **Looking after your body while you are pregnant:**

You can continue with most of your usual fitness activities, but be aware that you can injure yourself more easily because of the softening effects of hormones on your ligaments. For this reason it is not advisable to take up a new strenuous activity in pregnancy.

Swimming is an ideal way to maintain your fitness in pregnancy. Aqua natal classes with qualified instructors may be held at your local swimming pool – ring your local swimming pool, or ask your midwife.

Be aware of your posture! Standing tall (rather than leaning back on your hips with your tummy pushed out) will help prevent back pain. Try and sit with your lower back supported and when you are lifting / picking something up, bend your knees not your back.

## **Pelvic floor exercises:**

The pelvic floor is a group of muscles, which run from the pubic bone at the front to the tail bone at the back. They control the exits of the bladder and bowel, and working with other muscles have an important role in stabilising the joints of the pelvis and spine. The pelvic floor muscles are weakened in pregnancy by the weight of the baby and hormonal changes, and are stretched in childbirth.

To exercise these muscles: Sitting or standing with the legs slightly apart, lift and pull up the front and back passages, as if trying to stop yourself passing 'wind' or urine. Hold for a count of four, and then relax. Repeat four times. Now do four quick squeezes in the same way (make sure you are pulling up and not bearing down). It is not a good idea to keep stopping and starting your flow when passing urine.

This exercise should be done throughout the day, every hour if you can, every day of your life.

### **Maternity and Paternity leave:**

Detailed guidance on existing rights is given in '*Maternity rights*' and '*Working fathers: rights to paternity leave and pay*', which are available free from either:

- the Department of Trade and Industry (DTI) Publications order line on 0870 1502 500
- or
- can be ordered over the Internet from [www.dti.gov.uk/publications](http://www.dti.gov.uk/publications)

You can also use the DTI's interactive guidance site [www.tiger.gov.uk](http://www.tiger.gov.uk) to work out entitlements to maternity and paternity leave and pay.

### **Quality of care:**

We aim to offer a service that meets your needs and are interested in any comments you would like to make. We welcome any suggestions for improvements and comments when we do well. Please write to:

Community Midwifery Manager  
Directorate of Women's, Perinatal and Sexual Health Services  
University Hospitals of Leicester NHS Trust  
Leicester Royal Infirmary  
Leicester  
LE1 5WW

## **Useful telephone numbers:**

### ***Monday – Friday 8.30am – 4.00pm***

If you are worried that your baby isn't moving as much as it normally does **after 28 weeks** please contact the Antenatal Assessment Area (LRI) or the Pregnancy Assessment Service (LGH).

- LRI Antenatal Assessment Area 0116 258 6406
- LGH Pregnancy Assessment Service 0116 258 4829

### ***TRIAGE / Maternity Assessment Unit***

Emergency Assessment Unit for pregnancies **over 16 weeks**.

- LRI Delivery Suite 0116 258 6451/2
- LRI Kensington Birth Centre 0116 258 6113
- LGH Delivery Suite 0116 258 4807
- St Mary's Birth Centre 01664 854 854

### ***Midwifery Led Care***

If you think you are in labour and you are **more than 37 weeks** pregnant.

- LRI TRIAGE 0116 258 6312
- LGH Maternity Assessment Unit 0116 258 4808
- LRI Kensington Birth Centre 0116 258 6113
- St Mary's Birth Centre 01664 854 854

### **Useful contact numbers *continued* ...**

Alcohol advice	0116 255 2212
Association of breastfeeding mothers <a href="http://www.home.clara.net/abm/">www.home.clara.net/abm/</a>	020 78131481
Domestic violence help line	0116 255 0004
Drugs advice	0116 247 0200
DTI publications helpline <a href="http://www.dti.gov.uk/publications">www.dti.gov.uk/publications</a>	0870 150 2500
NCT <a href="http://www.nctpregnancyandbabycare.com">www.nctpregnancyandbabycare.com</a>	08704 448707
Resolution stop smoking Pregnancy support programme	0116 225 2828 0116 258 8865

If you would like a copy of this information on tape, in large print, in Braille or in another language, please contact the Service Equality Manager on 0116 258 4382.

আপনি যদি এই লিফলেটের অনুবাদ - লিখিত বা অডিও টেপ'এ চান, তাহলে অনুগ্রহ করে সার্ভিস ইকুয়ালিটি ম্যানেজার ডেভ বেকার'এর সাথে 0116 2584382 নাম্বারে যোগাযোগ করুন।

यदि आप को इस लीफ़लेट का लिखती या टेप पर अनुवाद चाहिए तो कृपया डेव बेकर, सर्विस इक्वालिटी मैनेजर से 0116 2584382 पर सम्पर्क कीजिए।

જો તમને આ પત્રિકાનું લેખન અથવા ટેપ પર ભાષાંતર જોઈતું હોય તો મહેરબાની કરી ડેવ બેકર, સર્વિસ ઇક્વાલિટી મેનેજર-નો 0116 2584382 ઉપર સંપર્ક કરો.

Haddaad rabto warqadan oo turjuman oo ku duuban cajalad ama qoraal ah fadlan la xiriiir, Maamulaha Adeegga Sinaanta 0116 258 4382.

ਜੇਕਰ ਤੁਹਾਨੂੰ ਇਸ ਲੀਫ਼ਲੇਟ ਦਾ ਲਿਖਤੀ ਜਾਂ ਟੇਪ ਕੀਤਾ ਅਨੁਵਾਦ ਚਾਹੀਦਾ ਹੋਵੇ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਡੇਵ ਬੇਕਰ, ਸਰਵਿਸ ਇਕੁਅਲਿਟੀ ਮੈਨੇਜਰ ਨਾਲ 0116. 2584382 ਤੇ ਸੰਪਰਕ ਕਰੋ।

Eğer bu broşürün (kitapçığın) yazılı veya kasetli açıklamasını isterseniz lütfen servis müdürüne 0116 258 4382 telefonundann ulaşabilirsiniz.

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Directorate of Women's, Perinatal & Sexual Health Services