

Keeping mothers and babies together – our pathway explained

Information for families

This leaflet provides information about our 'keeping mothers and babies together' pathway. If you have any questions or concerns, please speak to your midwife.

What is the aim of the keeping mothers and babies together pathway?

Most babies stay with their mothers on the postnatal ward after birth. Some babies require extra support and monitoring on the ward, including:

- babies born 4-5 weeks early or who are small (<2.5kg)
- babies requiring antibiotics
- babies requiring phototherapy
- babies requiring extra observations including blood sugar monitoring.

The keeping mothers and babies together pathway allows the medical and midwifery teams to easily identify these more vulnerable babies and support families in looking after them, so that mother and baby can stay together and mother can be the primary carer for her baby.



Does this mean my baby will not go to the neonatal unit?

Our aim is to give you the support that you need so that your baby can

remain with you at all times. Sometimes however, there may be a need for your baby to go to the neonatal unit. If this happens it will be fully discussed with you with one of the paediatric doctors, as well as the midwives looking after you.

Why does my baby have an orange hat?

All babies identified as needing additional care should wear an orange hat for the first 12 hours of life. This helps the team easily identify which babies need extra care and allows the team to take timely observations, blood sugar tests and provide extra support to establish feeding.

You don't have to use the orange hat on your baby. If you prefer to use your own hat, ask for the orange hat to be taped to your baby's cot so that it is still visible to the team to highlight that your baby needs extra attention. After 12 hours the orange hat will be removed as your baby will no longer need it, but if you would like to keep it as a memento please ask the midwife.



In hospital, hats are often advised as baby adapts to life – however once home your baby should not wear a hat indoors. If returning home from a trip outside with your baby, please remove their hat.

What does being on the keeping mothers and babies together pathway involve?

Babies identified as needing extra support will be given:

- **An orange hat**
- **Monitoring of baby's temperature, breathing and heart rate:** every two hours for at least 12 hours. Some babies (eg babies receiving antibiotics or phototherapy treatment for jaundice) will continue to have their observations monitored

every four hours thereafter.

- **Feeding support:** You will be given a feed chart so that we can monitor how well your baby is feeding and whether extra support is needed. Your baby should feed at least every three hours. By noticing when your baby shows feeding cues (eg mouthing, murmuring and getting fidgety) this can be more frequent.
- **Temperature monitoring:** Premature and small babies can sometimes find it difficult to maintain their body temperature. Your baby's temperature will be monitored regularly and support will be given to maintain their body temperature within normal levels.
- **Blood sugar monitoring:** This will be done for some babies including premature babies, small babies and babies at risk of low blood sugars. We check blood sugar levels by taking a drop of blood from your baby's heel. This is done prior to feeding your baby, and with regular feeding, the level usually stabilises quite quickly and monitoring can soon stop.
- **Weighing:** If you are still on the postnatal ward, your baby will be weighed on day three of life. If you have gone home, a midwife will visit you and your baby and weigh your baby on day three of life if they weighed less than 2.5kg at birth. All other babies are weighed on day five of life.
- **Newborn check:** All babies will have a complete newborn head-to-toe check within the first three days of life. Please ask a member of the team if you are not sure whether this has been done.

When can I go home?

Babies will be discharged once all the observations are stable, feeding is well established and other treatments such as antibiotics or phototherapy for jaundice have been completed. The length of time is different for each baby. The midwife or paediatric doctor looking after your baby will be able to discuss this with you.

Contact

For questions regarding your baby's care, please speak to the midwife looking after your baby or the midwife in charge.

If you have any questions or comments about the keeping mothers and babies together pathway, please speak to matron on the ward.

Your experience

We are continuously looking to improve the care we provide so we welcome your feedback on the pathway. We may hold patient feedback sessions. If you would like to participate in a future feedback session, please contact our patient experience manager on 020 8375 8501 or email: rf.patientexperience@nhs.net. Please mention the keeping mothers and babies together pathway.



You can also leave us feedback on Twitter (@MumBaby2gether) or via NHS Choices.

Useful resources

NHS Choices: Your pregnancy and baby guide
www.nhs.uk/conditions/pregnancy-and-baby/being-a-parent

For more information about the maternity services at the Royal Free London, visit our website: www.royalfree.nhs.uk/maternity

This leaflet is also available in large print. If you need this leaflet in another format – for example Braille, a language other than English or audio – please ask a member of staff.

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