

PERSONAL CARE AND SUPPORT PLAN

For you and your family



This information booklet should be given to you at the beginning of your pregnancy along with any other relevant information and contact numbers you may need.

The booklet is for people who are pregnant, and care is provided within Northamptonshire. Using this booklet early on and throughout your pregnancy will be helpful.

What is a Personal Care and Support Plan?

A Personal care and support plan helps you to explore, understand and record your individual choices for pregnancy, birth and early parenthood. All women and pregnant people are different, with individual needs, which have an influence on the choices they make and the care given. Decisions regarding care should be made in partnership with your maternity team and those close to you (such as family and friends). Midwives and doctors can offer advice but this is your pregnancy and your birth and it's important that you feel at the centre of your care and are aware of all the choices available to you.

In this booklet you will find personal care plans for:

• **Health and wellbeing in pregnancy** **5-11**

Complete at the beginning of (or anytime during) your pregnancy

• **Personalised birth preferences** **12-19**

Complete from 32-34 weeks of pregnancy

• **After your baby is born** **20-25**

Complete from 34 weeks of pregnancy

• **Birth reflections** **26-29**

Complete after your baby's birth

There may be other information which you may then want to discuss with your midwife. This can then help you to make decisions about your care.

Your midwife and/or doctor can help you to complete or adapt your personal care plan at any point, and you are encouraged to revisit your plan and preferences with them at every contact throughout pregnancy.

It is important to remember that a plan is just that – and that it may need to be reviewed and changed around your needs and the needs of your baby, to ensure care is always high quality and safe.

How to use this booklet

During pregnancy we encourage every woman and pregnant person to complete their own personal care plan, in partnership with their midwives and/ or doctors. Your personal care plan can be written in this booklet and discussed at every contact you have with the Maternity team supporting you.

Choosing place of birth

In Northamptonshire you have the choice as to where you give birth to your baby (at home, in a midwifery led birth centre or on a Delivery Suite, where there is access to a doctor if you should need one).

Kettering General Hospital provide both midwifery and obstetric led care on their delivery suite. Active birth is encouraged and birthing pools are available. The midwife led unit (Barratt Birth Centre) is within Northampton General Hospital but women who live anywhere in the county can choose to give birth there.

Both hospitals support a home birth service.

This personal care and support plan booklet can support you in making this choice in partnership with your Maternity team.

NHS England has produced some helpful information “Where to give birth: the options” which can be found on the NHS Health A-Z website.

You can also find information about local choices on the hospital websites.

www.northamptongeneral.nhs.uk

www.kgh.nhs.uk/maternity-services

About me

Have you had a previous loss? Yes No

My estimated due date is...

My maternity unit is...

My intended place of birth
(home, midwife-led unit or obstetric-led unit) is...

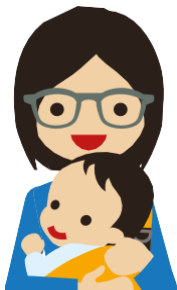
My team's name is...

My named midwife is...

My midwife/team contact details are...

My named obstetric/midwife consultant is...

My known medical conditions/allergies are...



Health and wellbeing in pregnancy

Physical health and wellbeing

1. I have additional requirements...

- 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

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

My thoughts, feelings and questions:

2. I have a long term health condition that may affect my pregnancy...

- | | | |
|--|--|---|
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Hypo/Hyperthyroidism |
| <input type="checkbox"/> Psychological Issue/s | <input type="checkbox"/> High Blood Pressure | <input type="checkbox"/> Heart C |
| <input type="checkbox"/> Asthma | | |
| <input type="checkbox"/> Other | | |
|
<input type="checkbox"/> None | | |

There are many conditions that may or may not have an impact on your pregnancy. Ask your doctor or midwife about any conditions you have or may have had in the past. These could include one of the following or any other medical condition.

Notes:

3. It is recommended that you discuss pre-existing medical conditions and/or special requirements with your midwife or doctor prior to becoming pregnant or in early pregnancy...

- I have discussed my pre-existing medical condition(s) with one of the above
- I require further support with my medical condition(s) or special needs
- I am not sure/I would like to find out more

Notes:

4. I am taking the following medication and/or supplements...

- I am aware of the recommendations and I have discussed this with my doctor or midwife
- I am not sure/I would like to find out more

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

My thoughts, feelings and questions:

Lifestyle and wellbeing

(Complete at the beginning of your pregnancy)

5. It is recommended that you avoid some foods whilst pregnant, as they can cause harm to you and your unborn baby...

- I am aware of what foods to avoid in pregnancy
- I am not sure/I would like to find out more

Notes:

6. It is recommended that you try to maintain a healthy and balanced diet in pregnancy...

- I am aware of my nutritional needs in pregnancy
- I have specific circumstances that affect my dietary requirements and I would like guidance from my maternity team
- I am not sure/I would like to find out more

My thoughts, feelings and questions:

7. For the majority of women, regular light to moderate exercise is recommended in pregnancy...

- I am aware of the recommendations about exercise
- I have a condition that affects my ability to exercise and I would like guidance from my maternity team
- I am not sure/I would like to find out more

My thoughts, feelings and questions:

8. For the health and wellbeing of you and your baby, you are advised not to smoke, drink alcohol or use recreational drugs in pregnancy...

- I am aware of advice around the consumption of alcohol, tobacco/nicotine products and recreational/illegal drugs
- I am not sure/I would like to find out more

You can talk to your midwife or doctor for support with quitting smoking, drinking alcohol or taking recreational/illegal drugs.

My thoughts, feelings and questions:

Emotional health and wellbeing

Expecting a baby can be a joyful and exciting time, however it is also common in pregnancy to experience anxiety, depression or emotional distress.

9. I have a long-term mental health condition that may affect my pregnancy...

- | | |
|---|---|
| <input type="checkbox"/> Depression | <input type="checkbox"/> Schizoaffective Disorder |
| <input type="checkbox"/> Anxiety | <input type="checkbox"/> Schizophrenia or any other psychotic illness |
| <input type="checkbox"/> Obsessive Compulsive Disorder (OCD) | <input type="checkbox"/> Eating Disorder |
| <input type="checkbox"/> Bipolar Effective Disorder (also known as Manic Depression or Mania) | <input type="checkbox"/> Personality Disorder |
| <input type="checkbox"/> Postpartum Psychosis | <input type="checkbox"/> Any other mental health condition for which you have seen a psychiatrist or other mental health professional |

Please tell your midwife, doctor or other health professional if you or a close family member have experienced any of the above conditions. There is an increased chance of some conditions around this time and for these, specialist perinatal mental health advice and support is available. Some women and pregnant people have lots of questions about their previous pregnancy or birth or find it upsetting to think about. If this is the case please let your midwife know so that she can arrange an opportunity for you to talk about this.

My thoughts, feelings and questions:

If you are prescribed medication for your mental health condition, please do not automatically stop.

10. This is how I'm feeling at the moment...

Write down any concerns or worries you have, and talk to your friends, family, midwife, GP or doctor.

11. Getting to know your baby during pregnancy helps to build strong parental relationships and will also help with your emotional wellbeing. You can try...

- Talking, singing or playing music to your unborn baby
- gently massaging your bump
- pregnancy yoga and/or hypnotherapy
- using an app to track your baby's growth and development
- reading UNICEF's 'building a happy baby guide'

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

My thoughts, feelings and questions:

12. I am aware of things I can do to enhance my emotional wellbeing...

- Taking regular gentle exercise, such as pregnancy yoga, walking or swimming
- ensuring I eat well
- trying relaxation techniques, listening to music, meditation or breathing exercises
- taking time for myself, somewhere I can relax
- talking to someone I trust – friend, family, midwife, GP or doctor
- asking for practical help with household chores or other children

My thoughts, feelings and questions:

13. Specialist support for pregnant people with anxiety and depression or any other mental health condition is available...

- I am aware of how to access mental health support if I need it whilst pregnant
- I am not sure/I would like to find out more

If you feel that you need some emotional support, you can refer yourself to your local talking therapies service. This is free and pregnant people are prioritised. See: <https://www.nhft.nhs.uk/iapt>

My thoughts, feelings and questions:

14. Emotions my partner, family and I should look out for include...

- Tearfulness
- feeling overwhelmed
- feeling irritable or arguing more often
- difficulty concentrating
- change in appetite
- problems sleeping or extreme energy
- racing thoughts
- feeling very anxious
- loss of interest in things I normally like
- being so afraid of birth that I don't want to go through with it
- having unpleasant thoughts that I can't control or keep coming back
- suicidal feelings or thoughts of self harm
- repeating actions or developing strict rituals
- lack of feeling towards my unborn baby

If you are worried by any of these feelings, talk to your midwife or doctor.

My thoughts, feelings and questions:

15. Everyone expects that the news of a baby will bring joy and happiness but for one in ten partners it can trigger depression. The feeling of responsibility can feel overwhelming and also the thought of the changes that having a baby will inevitably bring. It might be helpful to share this booklet with your partner and they can use this page to express how they are feeling too.

If you're anxious about becoming a parent try to be more involved with the pregnancy. Going with your partner to antenatal classes, attending appointments and scans can help you to feel involved.

Use this page to note down anything you would like your midwife to explain to you. Or use the questions as a prompt to describe your thoughts, feelings and questions.

I am most looking forward to...

What is worrying me most...

I would like more information about...



Personalised birth preferences

A birth plan supports you (and your birth partner/s) to make informed decisions about your care in labour. Sharing your preferences with your care providers enables them to personalise the care they give you.

Work your way through the questions at your own pace. **You can show this plan to your midwife from 34 weeks onwards.**

1. **I am aware of my three choices of birth setting (home, birth centre and labour ward) and have had a discussion with my midwife/doctor about which option is recommended for me. I would prefer to give birth...**

- At home
- in a birth centre
- in a labour ward
- I prefer to wait and see
- I am not sure/I would like to find out more

Certain options might be recommended for you based on your personal health and pregnancy.

My thoughts, feelings and questions:

2. **My birth partner(s) will be...**

If you give birth in hospital you are able to have two birth partners with you.

3. Student midwives/doctors may be working with the team when I have my baby...

- I am happy for a student to be present during my labour/birth
- I prefer that no students are present during my labour/birth
- I prefer to wait and see
- I am not sure/I would like to find out more

Students work closely alongside their named midwife mentor and will provide you with care and support under supervision, with your consent.

My thoughts, feelings and questions:

4. I have additional requirements...

- I will need help 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

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

My thoughts, feelings and questions:

5. I have had a discussion with my midwife/doctor about how I would like to give birth, my thoughts and feelings are...

Most women and pregnant people will have a vaginal birth, however for some a caesarean birth may be recommended.

My thoughts, feelings and questions:

If you are having a planned caesarean birth please go to question 14 ➔

6. In some circumstances, your midwife or doctor may recommend starting your labour artificially, instead of waiting for it to start naturally (this is known as induction of labour).

- I am aware of why an induction might be recommended
- I am not sure/I would like to find out more

If you go 12 or more days past your due date, have certain medical conditions, or your doctor is concerned about the health of your baby you may be offered an induction of labour. This will be planned carefully with your midwife/doctor.

My thoughts, feelings and questions:

7. During labour and birth I would consider the following coping strategies/pain relief...

- I prefer to avoid all pain relief
- self-hypnosis/hypnobirthing
- aromatherapy/homeopathy/reflexology
- water (bath or birthing pool)
- TENS machine (transcutaneous electrical nerve stimulation)
- gas and air (entonox)
- pethidine/diamorphine/meptid (opioid injection)
- epidural
- I prefer to wait and see
- I am not sure/would like to find out more

Your options for pain relief will depend on where you plan to give birth. Discuss with your midwife and ask what options are available to you with your local maternity service.

My thoughts, feelings and questions:

8. During labour and birth I would consider...

- | | |
|---|--|
| <input type="checkbox"/> Massage | <input type="checkbox"/> walking/standing |
| <input type="checkbox"/> different upright positions such as all fours/squatting/kneeling | <input type="checkbox"/> a birthing ball |
| <input type="checkbox"/> bean bags, birth stools and birth couches if available | <input type="checkbox"/> a birthing pool |
| <input type="checkbox"/> a bed, for rest – propped up with pillows or whilst lying on my side | <input type="checkbox"/> music to be played (which I will provide) |
| <input type="checkbox"/> the lights dimmed | <input type="checkbox"/> my birth partner taking photographs/filming |
| <input type="checkbox"/> I prefer to wait and see | <input type="checkbox"/> I am not sure/I would like to find out more |

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

My thoughts, feelings and questions:

9. For many women and pregnant people who are under midwife led care or have had a straightforward pregnancy or previous birth, there is no need to have continuous monitoring of their baby's heartbeat, as this is known not to lead to better outcomes. Your midwife can listen in using a hand held device.

- 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 I need continuous monitoring I would like to be mobile and use wireless monitoring if available
- I prefer to wait and see
- I am not sure/I would like to find out more

My thoughts, feelings and questions:

10. During labour, your midwife and/or doctor may recommend vaginal examinations to assess the progress of your labour...

- I am aware of why vaginal examinations are part of routine care
- I prefer to avoid vaginal examinations if possible
- I prefer to wait and see
- I am not sure/I would like to find out more

Vaginal examinations are a routine part of assessing labour progress and will not be undertaken without your consent.

My thoughts, feelings and questions:

11. In some circumstances, your midwife or doctor may recommend interventions to assist with your labour...

- I am aware of why assistance/intervention might be recommended
- I am not sure/I would like to find out more

Interventions may be recommended if your labour slows down, or if there are concerns with you or your baby's health.

My thoughts, feelings and questions:

12. In some circumstances, your maternity team may recommend an assisted or caesarean birth...

- I understand why an assisted birth might be recommended
- I am not sure/I would like to find out more

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

My thoughts, feelings and questions:

13. In some circumstances, your midwife or doctor may recommend a cut to the perineum to facilitate birth (episiotomy)...

- I understand why an episiotomy might be recommended
- I prefer to avoid an episiotomy
- I am not sure/I would like to find out more

An episiotomy may be recommended for an assisted birth (forceps or ventouse) or if your midwife/ doctor is concerned that your baby needs to be born quickly. Your midwife/ doctor will always ask for your consent (permission).

My thoughts, feelings and questions:

14. After your baby is born, your placenta will be expelled (this is known as the third stage of labour). There are two ways this can happen...

- I would like to have a natural (physiological) third stage, the cord is left intact and I push the placenta out myself
- I would like to have an active third stage, where the cord is cut after a few minutes and I receive an injection of oxytocin, the midwife/doctor delivers my placenta
- I prefer to wait and see
- I am not sure/I would like to find out more
- I/my birth partner would like to cut the umbilical cord
- I prefer the midwife/doctor to cut the umbilical cord

Your midwife or doctor may recommend an active third stage due to your personal circumstance and will discuss this with you at the time of birth.

My thoughts, feelings and questions:

15. Skin-to-skin contact with your baby immediately after birth is recommended for all...

- I understand why skin-to-skin contact is recommended
- I would like immediate skin-to-skin contact
- I prefer to wait and see
- I am not sure/I would like to find out more

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.

My thoughts, feelings and questions:

16. I am aware that I will be provided with support to feed my baby, my thoughts around feeding are...

During pregnancy you will have a chance to discuss infant feeding, this will include information about the value of breastfeeding. A midwife will help you to get feeding off to a good start as soon as your baby shows cues that he/she is ready to feed.

17. After my baby is born, they will be offered Vitamin K...

- I would like my baby to have Vitamin K by injection
- I would like my baby to have Vitamin K by oral drops
- I do not want my baby to have Vitamin K
- I am not sure/I would like to find out more

Vitamin K is a supplement that is recommended for all babies that prevents a rare condition known as Vitamin K Deficiency Bleeding (VKDB). It has no known side effects.

My thoughts, feelings and questions:



After your baby is born

We recommend that you revisit these pages after your baby is born, by sharing it with your postnatal maternity team.

Developing a relationship with your baby

1. Have you watched UNICEF's 'Meeting your baby for the first time' video?

- Yes
 no
 I am not sure/would like to know more

My thoughts, feelings and questions:

This video can be viewed at www.unicef.org.uk/babyfriendly/baby-friendly-resources/relationship-building-resources/meeting-baby-for-the-first-time-video/

2. Skin-to-skin contact with your baby after birth and beyond is recommended for all...

- I am aware of the benefits of skin-to-skin contact
 I am not sure/I would like to find out more

My thoughts, feelings and questions:

Babies cannot be spoilt by cuddling and frequent breastfeeding.

3. All women and pregnant people are given information about the value of breastfeeding, and how to get infant feeding off to a good start...

- I am aware of the value of breastfeeding
- I am aware of how to get feeding off to a good start
- I am not sure/I would like to find out more

My thoughts, feelings and questions:

4. **Babies often show early signs that they might be ready to feed...**

- I am aware of the signs to look out for that my baby might be ready to feed
- I am not sure/I would like to find out more

Early signs that your baby may be ready to feed are...

Preparing for the first few hours and days after birth

5. **Visiting hours at your maternity unit can vary...**

- I have checked visiting times and I am aware of who can visit me after birth
- I am not sure/I would like to find out more

It's useful to find out visiting times, particularly if you might have visitors travelling from a long distance as these may vary and change due to local factors

My thoughts, feelings and questions:

6. Thinking about having things ready at home...

Think about what things you could do now to make caring for yourself and your baby easier at home.

My thoughts, feelings and questions:

7. Thinking about who will be able to support you after giving birth when at home...

Your partner, friends, family or a neighbour, it's worth considering who will be able to help you at home.

My thoughts, feelings and questions:

Your physical and emotional wellbeing after birth

8. Being prepared for your physical recovery after giving birth can help to get you and your new family off to the best start, I am aware of...

- Physical changes to expect
- postnatal pain relief options
- the importance of hand hygiene
- signs of infection and what to do
- pelvic floor exercises
- physical recovery after a caesarean birth
- I am not sure/I would like to find out more

My thoughts, feelings and questions:

9. Giving birth and becoming a parent is known to be a time of great emotional change, being aware of how you might feel after birth can help you to prepare...

- I am aware of the emotional changes to be expected
- I have considered what my family/friends can do to support me
- I know how to access support with my emotional and mental health after giving birth
- I am not sure/I would like to find out more

My thoughts, feelings and questions:

10. Feelings I and my family should look out for include...

- Persistent sadness/low mood
- lack of energy/feeling overly tired
- feeling unable to look after my baby
- problems concentrating or making decisions
- changes in appetite
- feelings of guilt, hopelessness or self-blame
- difficulty bonding with my baby
- problems sleeping or extreme energy
- loss of interest in things I normally like
- having unpleasant thoughts that I can't control or keep coming back
- suicidal feelings or thoughts of self-harm
- repeating actions or developing strict rituals

If you are worried by any of these feelings, talk to someone you trust and/or your midwife, health visitor or GP.

My thoughts, feelings and questions:

Caring for your baby

11. Things to consider before going home include...

- BCG vaccination (if offered by your maternity unit)
- how to tell if your baby is feeding well
- signs of an unwell baby and what to do if you're worried
- changes to expect in your baby's nappy

The team in your maternity unit will be on hand to provide support.

My thoughts, feelings and questions:

12. Things to consider for when you are at home include...

- Safe sleeping practices (sudden infant death syndrome prevention)
- newborn jaundice – what's normal, and what might need review
- the newborn blood spot screening test
- umbilical cord care and skin care
- bathing your baby

My thoughts, feelings and questions:

Community care and next steps

13. Community postnatal care is delivered in a variety of settings and by a multidisciplinary team of healthcare professionals. I am aware of...

- Community postnatal care
- how to contact my local community midwives
- how to contact my health visitor
- how to access additional infant feeding support
- how to access services in my local Children's Centers
- I am not sure/I would like to know mor

My thoughts, feelings and questions:

14. After the birth, I will need to...

- Register my baby's birth within six weeks
- register my baby with my GP
- book a postnatal check with my GP at six to eight weeks after the birth for both me and my baby.
- arrange for further tests at my GP surgery (If recommended by my midwife or doctor)

My thoughts, feelings and questions:

15. If you have a pre-existing medical condition or if you were unwell around the time of your birth, you may have specific medical recommendations made by your doctor...

- I have a pre-existing medical condition and I have discussed my specific postnatal care requirements with my doctor and midwife
- I experienced complications/was unwell around the birth, I am aware of the implications this may have on my postnatal care
- I am not sure/I would like to know more

My thoughts, feelings and questions:



Birth reflections

Information about your pregnancy and birth to discuss with your midwife or doctor

Use the space below to write down any significant concerns (medical, emotional or other) about your experience of pregnancy, labour, birth and immediately after birth – particularly if you think it could have an effect on your long term physical or emotional health, or the health of your baby. Share your concerns with your midwife or doctor.

1. In pregnancy...

My thoughts, feelings and questions:

A series of horizontal dotted lines for writing.

2. Around labour and birth...

My thoughts, feelings and questions:

Series of horizontal dotted lines for writing.

3. After birth...

My thoughts, feelings and questions:

Hopefully you will understand everything that happened during your labour but for some people this is something that they think about a lot afterwards and Struggle to 'piece it together.' Both Northampton General Hospital NHS Trust and Kettering General Hospital NHS Foundation Trust have Professional Midwifery Advocates who can help you to use the Birth Reflection /Listening service. This can be accessed at any time after giving birth or when you return for subsequent pregnancies. Ask your midwife or health visitor how to access this service at your maternity unit.

You can keep this booklet after your baby is born, you may find it is a useful record of your choices and preferences, and it may help and support you in any future pregnancy.



This booklet is available in Polish, Bengali, Romanian and Lithuanian. If you require this booklet in one of these languages, please advise your midwife.

Aby zamówić niniejszą ulotkę w innych formatach lub językach, prosimy o kontakt na adres e-mail nccg.communications@nhs.net

আপনার যদি এই পুস্তিকাটি অন্যান্য ফরম্যাট বা ভাষাতে প্রয়োজন হয়, অনুগ্রহ করে, nccg.communications@nhs.net -তে একটি ই-মেইল পাঠিয়ে আমাদের সাথে যোগাযোগ করুন

Dacă doriți această broșură în alte formate sau limbi, vă rugăm să ne contactați, trimițând un e-mail la nccg.communications@nhs.net

Norėdami užsisakyti šį bukletą kitais formatais ar kalbomis, prašome kreiptis į mus šiuo el. pašto adresu: nccg.communications@nhs.net arba prašykite pas savo akušerę (-į)

Northamptonshire LMNS understands the importance of language in breaking down barriers for people accessing care and is committed to using inclusive language in its communications, publications and patient information to meet the needs of all individuals. We would value any feedback to help us develop our communications.

Northamptonshire Integrated Care Board working in partnership with Kettering General Hospital NHS Foundation Trust, Northampton General Hospital NHS Trust, and Northamptonshire Healthcare NHS Foundation Trust.

The design and contents of this booklet have been based on the Personal Care Plan produced by NHS North West Collaboration of Clinical Commissioning Groups. This revised version has been produced by NHS Nene and Corby Clinical Commissioning Groups with permission from NHS North West Collaboration of Clinical Commissioning Groups.