



This leaflet gives you key information about the routines, facilities and help available to you during your stay with us on the Maternity Wards.

Visiting hours

2 x birth partners/supporters: 8.30am – 8.30pm One additional visitor: 4.00pm – 8.30pm

Siblings of the new-born are welcome to visit any time between **8.30am – 8.30pm** but must be supervised at all times.

No more than three adults at the bedside at any one time.

Meal times Medication rounds

Breakfast: 8.00am 5.00am and 11.00am

Lunch: 1.00pm and again between 5.00pm and 11.00pm

Dinner: 6.00pm

All staff attend a daily 30 minute Ward safety meeting at 7am, 2pm, 7pm and 2am, so there may be a delay in answering the call bells during these times.

Who's who on the ward...?



These are a few of the people you may meet on the wards. We do not provide one-on-one care but there is always a midwife responsible for you. Everyone should introduce themselves to you but please ask if you do not know who anyone is. If you have any concerns or questions, please ask to speak to a senior midwife, the midwife in charge or the maternity coordinator.

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Ward safety and behaviour

We have a few rules to keep everyone on the ward safe:

- For the safety of you and your baby / babies, please only transport your baby / babies in their
 cots which have wheels so that they can be pushed around the ward. Please do not carry
 your baby / babies in your arms.
- Babies can be left by the bedside while you visit the bathroom. The safest time to do this is when you have visitors so that they can stay with your baby. If this is not possible, please leave the curtain open and tell a member of staff that you are going to use the bathroom.
- Babies MUST NOT leave the wards until you are discharged and ready to go home.
- Do not open the main doors for anyone, or allow anyone to enter behind you. The doors have an intercom and the staff monitor and control who is on the ward. **This keeps everyone safe!**
- Visiting times are to be respected at all times. If you feel that you need additional physical or emotional support outside of visiting hours, please speak to a midwife.
- There may be occasions, such as emergencies or other clinical needs, when visitors may be asked to leave the bedside we thank you for your understanding and cooperation.

We also ask that everyone is respectful of others, their privacy and belongings:

- Please store any personal belongings in the locker next to your bed. You are responsible for your own belongings.
- Please be considerate when using your mobile phone / tablet / laptop. Please use headphones whenever possible.
- Birthing partners / visitors should make phone calls off the ward so that we can keep noise levels to a minimum.
- Please be respectful, polite and considerate to all those you meet during your stay here on the maternity ward.

We really do appreciate your cooperation – it helps us keep the ward running smoothly and safely for everyone!

What we can provide

As well as caring for you and helping you to learn about caring for your baby / babies, we provide clean towels and bed linen that is changed daily. We can also provide some expressing and bottle feeding basic equipment if you need it:

What we provide:

- Bottles for milk
- Sterilising bags
- Pumps for expressing milk
- Colostrum containers

What you need to bring:

- Nappies
- Nappy sacks
- Baby wipes or creams
- Any clothing, or slippers for you or baby / babies
- Any toiletries
- Maternity pads
- Breast pads
- Formula milk*

*We will **only** provide ready-made formula milk **if medically required**. If you are choosing to formula feed, please ask your birthing partner or visitors to bring in enough for you to feed your baby / babies during your stay. If there is something you need that cannot be provided by your visitors or birthing partner, please speak to a midwife.

The ward

While staying with us you will be allocated a bed, either in a bay or in a side room (these are allocated based on medical need). You also have access to the family kitchens, the Nursery, Infant Feeding Room and to the bathrooms, which have showers and toilets.

Bathrooms

There are bathrooms with showers and toilets situated outside each bay. These are for women and birthing people's use only. There is a toilet for families / visitors (off the ward) in the stairwell opposite the lifts.

The Nursery

You will find the Nursery next to the reception area at the end of Iffley Ward entrance corridor. The Nursery has feeding equipment, a sink and a microwave for sterilising.

- You can sterilise pumping and bottle feeding equipment in the Nursery – please ask a midwife or maternity support worker to help you use this.
- Milk expressing pumps are available for you to use in the Nursery – please ask your midwife if you would like to use one.



Infant Feeding Room

The Infant Feeding Room is on Iffley Ward (on the right hand side as you come in the entrance door). This is a quiet comfortable space for you to use if you want a change of scenery, to relax and feed your baby.



Family kitchens

We have two small family kitchens (one on each ward) equipped with basics, such as a fridge and microwave, plus tea and coffee making facilities. Please keep these areas clean and tidy and ensure that any food is clearly labelled. **Baby milk must not be stored in these fridges.**



Iffley family kitchen

Marsh family kitchen

Baby clothes

We have a selection of baby clothes for sale in two display cabinets on Iffley Ward – (cardigans, hats, bootees, blankets and knitted toys).

Please scan the QR code for more information on how to purchase or to make a donation to the RBH Charity.





Secure milk storage

- Both breast and formula milk (once opened) can be stored in our milk fridges. This facility helps to reduce waste and also ensures that safe storage guidelines are being followed.
- Only members of ward staff have access to the milk fridges. Please ask a midwife or maternity care assistant when you are ready to feed and they will retrieve your milk for you.

Feeding your baby / babies

Please tell us how you want to feed your baby and we will support you.

WHO and UNICEF recommend that breastfeeding begins within the first hour of birth and that infants be exclusively breastfed for at least the first six months of life.

We have lots of information to help you on your feeding journey and a specialist team to offer feeding advice and guidance if you are facing challenges with breastfeeding.

To make sure you are confident feeding your baby / babies, we suggest that you keep a feeding diary during your stay on the ward. This is a good way to record how often and how much your baby / babies feed. We would like to see your baby / babies feeding to make sure all is well. Please use the call bell to alert the midwife just before you start or during a feed. Ideally we will observe a whole feed at least twice before you go home.

Breastfeeding

How to breastfeed

Breastfeeding is something you and your baby learn together, and, like anything new, you need to get the hang of it. Here's how:









For more information on breastfeeding positions, visit: nhs.uk/start4life

- Hold your baby's whole body close with their nose level with your nipple. Make sure their head and body are in a line and facing you, so they are not twisting their head or body awkwardly. Support your baby along their back and shoulders rather than their head so they can move their head freely to attach to your breast.
- Let your baby's head tip back a little so that their top lip can brush against your nipple. This should help your baby to make a wide open mouth.
- When your baby's mouth opens wide, their chin should be able to touch your breast first, with their head tipped back so that their tongue can reach as much breast as possible.
- 4. With their chin touching your breast and their nose clear, their mouth should be wide open. You will see much more of the darker skin of your nipple above your baby's top lip than below their bottom lip. Your baby's cheeks will look full and rounded as they feed.



Scan the QR code for breastfeeding information in: Arabic, Bengali, Hindi, Lithuanian, Mandarin, Polish, Romanian, Slovak, Turkish, Ukrainian and Urdu.

Formula feeding

Feed your baby when they show signs of being hungry - look out for cues (moving head and mouth around, sucking on fingers). Crying is the last sign of wanting to feed, so try and feed your baby before they cry.

Hold baby close in a semi-upright position so you can see their face and reassure them by looking into their eyes and talking to them during the feed. Begin by inviting baby to open their mouth - gently rub the teat against their top lip.

Gently insert the teat into baby's mouth keeping the bottle in a horizontal position (just slightly tipped) to prevent milk from flowing too fast.







Baby's nappies

A good way to tell how well your baby is feeding is to check their nappies, how wet they are and what their poo looks like. This diagram (right) shows how your baby's poo will change from black (meconium) to looser green and finally yellow poo.

Your baby's nappies



- In the first 48 hours, your baby is likely to have only 2 or 3 wet nappies. Wet nappies should then start to become more frequent, with at least 6 every 24 hours from day 5 onwards.
- At the beginning, your baby will pass a black tar-like poo (called meconium).
- By day 3, this should be changing to a lighter, loose, greenish poo.
- From day 4 and for the first 4 6 weeks, your baby should pass at least 2 yellow poos a day.
- If your baby has not pooed in the last 24-48 hours, speak to your midwife or health visitor as this may mean they aren't getting enough milk.

Going home / being discharged

Most discharges take place in the afternoon/early evening. A number of different medical professionals will be involved in the process of preparing you for discharge. Your midwife will be the one to complete your discharge and will have the best idea of where you are in that process.

Feel free to ask!

There are some checks which everyone requires before discharge. These are listed below.

Discharge checklist – before you go home, the following things should happen:

- A routine daily health check of mum and baby by the midwife.
- A new-born and infant physical examination (NIPE) by a paediatrician (doctor specialising in child care) or specialist midwife.
- New-born hearing assessment by a screening specialist. (This may be arranged for a future date if the specialist is not available before you leave the unit.)
- Discharge conversation with the midwife and two successful feeds observed.
- Computer discharge completed by the senior maternity support worker.

Before you go home, please scan the QR code to complete our Friends and Family Test survey – your feedback is valued and used when we make decisions on how we provide care on our wards – thank you.



Safe sleeping

Good practice ✓

- Place your baby to sleep in a separate sleep space, such as a cot or Moses basket, in the same room as you, for the first six months.
- If you find you are co-sleeping, then follow the safe space advice to minimise risks.
- Always place your baby on their back to sleep. The mattress should be clean, firm, flat, waterproof and in good condition. The rest of the sleep space should be clear.
- Keep your baby 'smoke free' during pregnancy and after birth.
- Breastfeeding lowers the risk of SIDS. Breastfeeding for at least two months halves the risk of SIDS but the longer you can continue, the more protection it will give your baby / babies.
- Firmly tuck in sheets and blankets (not above shoulder height). Baby should sleep in the feet-to-foot position (feet at the bottom of the cot, so they can't wriggle down under the blankets).

What to avoid *

- Never sleep in the same bed as your baby if you are extremely tired, smoke, drink, take drugs, or if your baby was born prematurely or was of low birth weight. Avoid letting your baby get too hot.
- Do not cover your baby's head or face while it is sleeping.
- Never sleep on a sofa / armchair / beanbag / sleeping bag with your baby.

Please scan the QR code to visit the Lullaby Trust for more information on safe sleeping.





Share feedback to help improve your maternity care



Partnership (MVP) is here to listen to your voice. We are independent but work together with the Royal Berkshire Hospital (RBH) to drive positive change and improve local maternity services. We listen, respond and act to ensure that local maternity care is safe, equitable, supportive and kind.



Please give us your feedback – scan the QR code for an easy link to our social media, website and ways to share your voice. You can also email us at feedback@rovalberkshiremnvp.org

Our Maternity Strategy and Vision

'Working together with women, birthing people and families to offer compassionate, supportive care and informed choice; striving for equity and excellence in our maternity service.'

You can read our maternity strategy here



PLEASE DO NOT REMOVE THIS BOOKLET FROM THE WARD BUT LEAVE IT BY YOUR BEDSIDE FOR OTHER SERVICE USERS TO **READ – THANK YOU**

The information contained in this leaflet is accurate at time of publishing (September 2023) and may be subject to change / review at any time.

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Maternity Unit, September 2023 – Next review due September 2025

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