



Welcome to the
John Hunter Hospital Birthing Services

Hunter New England Local Health District

Information for women and their families

November 2018



Acknowledgement of Country

“We would like to acknowledge the Traditional Custodians and community members of the land John Hunter Hospital is situated on, The Awabakal People and pay our respects to Elders, past, present and future”.



Artwork by Saretta Fielding

Front page artwork "Mother and Child" designed and sculpted by Matthew Harding, 1991 from a single log of Tasmanian Myrtle.

Contents

A Message From Our Service Manager	4
About This Booklet	5
About Us	5
When You Should Contact The Hospital	6
Baby Friendly Accredited Hospital	7
Now That You Are Pregnant	8
Antenatal Clinic - General Information	8
Options of Care During Pregnancy	10
Summary of Models of Care Available	12
Normal Pregnancy Timeline	13
Pregnancy Support Services	14
The Parenting Education Service	16
Parenting Education Programs	17
General Information For Maternity Inpatients	19
Birth Suite and Birth Centre	23
Antenatal Unit	26
Postnatal Unit	27
Keeping You And Your Baby Safe While In Hospital – Preventing Falls	30
Postnatal Timeline	31
Belmont Midwifery Group Practice (BMPG)	32
A Final Word	33
Acknowledgements	33
Index	34

A Message From Our Service Manager



Congratulations on your pregnancy and welcome to the John Hunter Hospital Birthing Service.

The John Hunter Hospital as part of the Hunter New England Local Health District (HNELHD) Service welcomes you and your family to our service.

We are committed to providing you and your family a quality service experience as you journey through pregnancy, birth and beginning parenthood.

HNELHD remains committed to Closing the Gap for Aboriginal members of the community. We welcome Aboriginal people from all communities.

We acknowledge and embrace the diversity of modern family structures. We welcome families from all cultural backgrounds and are committed to providing culturally appropriate and sensitive care.

Our focus for maternity care is to ensure that it is collaborative, where the woman and her family remain at the centre of the care experience and are actively involved in all decisions about the pregnancy, birth and after your baby is born. All decision making is based on relationships of mutual respect and trust.

Yours Sincerely,

A handwritten signature in cursive script, appearing to read "Carol Azzopardi".

Carol Azzopardi
Service Manager
Maternity and Gynaecology Service
John Hunter Hospital

About This Booklet

We understand that preparing for the birth of your baby can make you feel excited, anxious and overjoyed – in fact, a whole range of emotions.

We have prepared this booklet to answer some of your questions and to help you feel more comfortable about coming to our maternity service for your pregnancy care and birth. It aims to explain the many services and options for your care from John Hunter Hospital Maternity Services.

This booklet does not cover details about pregnancy, labour, birth or postnatal events or specific care. We recommend that you also read the NSW Health publication *Having a Baby in NSW*, which will be given to you at your first antenatal visit. This is also available online in many different languages:
www.health.nsw.gov.au/kidsfamilies/MCFhealth/Pages/Having-a-Baby-Book.aspx

About Us

The John Hunter Hospital (JHH) provides maternity care to women who live in the Greater Newcastle, Lake Macquarie and Port Stephens area, and other women and babies transferred for care from across the Hunter New England Local Health District and other parts of NSW.

Our team care for healthy women and their babies, as well as those with a wide range of more complicated needs. Our aim is to provide what we call ‘women-centred care.’ This means that we want to work with you to tailor your care to meet your individual needs.

The JHH has been caring for women and babies since it opened its doors in 1991. Around 4,000 babies are born at JHH each year. Most of these babies stay with their mothers but some may stay for a period of time in our Neonatal Intensive Care Unit (NICU). The JHH NICU is one of the largest in NSW; it has been refurbished to ensure that babies and their families are provided with state-of-the-art care in a modern, calm environment.

Our maternity care team are committed to ensuring that you have a safe and positive birth experience and that you have the support you need to begin caring for your newborn baby.



When You Should Contact The Hospital

Please phone JHH Birth Suite **4921 4350** immediately for advice if any of these occur:

- Your baby stops moving or there is an obvious reduction in your baby's movements at any time during your pregnancy
- Trauma to the abdomen, assault, serious fall or car accident
- Vaginal bleeding at any time
- Sharp pains in the abdomen with or without vaginal bleeding
- Your waters break or if you have a constant clear watery vaginal discharge
- Fever or chills, temperature over 37.8 degrees
- Severe nausea and persistent vomiting
- Recurring and persistent headaches
- Blurred vision or spots before your eyes
- Pain or burning on passing urine
- Contractions at any time before 37 weeks
- Sudden swelling of the face, hands or feet
- Persistently itchy skin, especially hands and feet
- Labour has started and you feel it is time to come to hospital
- Booked Caesarean birth and labour commences

JHH Maternity Telephone Numbers:

Birth Suite	(02) 4921 4350
--------------------	-----------------------

Antenatal Clinic	(02) 4921 3600
------------------	----------------

Acute Gynaecology Service	(02) 4985 5031
---------------------------	----------------

Birth & Parenting programs (Parenting Education Service)	(02) 4016 4595
--	----------------

Breastfeeding Clinic	(02) 4016 4595
----------------------	----------------

Belmont Midwifery Group Practice	(02) 4923 2108
----------------------------------	----------------

Birra Li Aboriginal Maternal and Child Health Service	(02) 4016 4900
---	----------------

K3 Antenatal Unit	(02) 4921 4660
-------------------	----------------

K2 Postnatal Ward	(02) 4921 3970
-------------------	----------------

John Hunter Hospital	(02) 4921 3000
----------------------	----------------

Baby Friendly Accredited Hospital

The John Hunter Hospital (JHH) is a Baby Friendly Accredited Health Service. **The Baby Friendly Initiative** *Ten Steps to Successful Breastfeeding* is the global standard developed by the World Health Organisation to ensure health services comply with an international standard relating to infant feeding and maternity care.

- We acknowledge the many benefits of breastfeeding to you, your baby and your family, and we will support you to make an informed choice on how you wish to feed your infant.
- We will maintain a high standard of education, and ensure that care and advice given to you is consistent and evidence-based.
- We seek to provide you, your family, and the community with clear factual information about the benefits and management of breastfeeding.
- We seek to protect the bond between you and your baby from the moment of birth. This protection begins with placing baby skin to skin at birth.
- We seek to assist you and your baby to establish breastfeeding, and to maintain your milk supply even if you need to be temporarily separated.
- We will give your baby no food or drink other than breast milk, unless there is a medical need to do so, and then only with your consent.
- We will not take your baby away for tests or procedures without your permission.
- We support you in feeding your baby when you and your baby are ready to breastfeed.

- We will not use artificial teats, dummies, or other nipple substitutes that may interfere with your baby learning to breastfeed unless there is a medical need to do so, and then only with your consent.
- We support and encourage breastfeeding support groups in the community.

In support of the best care journey for you and your infant from the antenatal to postnatal period, John Hunter Hospital is also committed to supporting mother-friendly labour and birth practices that have been shown to enhance an infant's start to life, including breastfeeding.

- We encourage you to have a support person of your choice throughout labour and birth.
- We support and encourage practices that can help with comfort and natural pain relief in labour.
- We encourage you to move about as you need to during labour and to use birthing positions of your choice, unless there is a medical reason.
- We will not use any interventions routinely such as: episiotomy, rupturing of membranes, induction of labour, instrumental or Caesarean birth, unless specifically required for a medical reason which will be explained to you.
- We encourage you to drink and eat light foods during labour.
- We will provide care that is culturally sensitive, according to your beliefs, customs, ethnicity and family dynamic.

Now That You Are Pregnant

Your care begins with your General Practitioner (GP), by confirming your pregnancy, taking a comprehensive health and medical history, ordering your blood tests and an obstetric ultrasound.

Your GP will write and send a referral to the John Hunter Hospital (JHH) antenatal clinic to initiate your care, and is usually done at around 12 -14 weeks.

Once JHH has received your completed referral, including all blood test results and scan reports, our antenatal clinic coordinator will then process

your details and notify you by mail with an appointment time to have a booking in visit. This visit will be attended by a midwife at either JHH or one of our community-based antenatal clinics and usually occurs around the 18th to 22nd week of your pregnancy. During this visit, the midwife will discuss with you the options of care available for your pregnancy (see pages 10-12).

Where you have your pregnancy care will depend on your general health, your preferences, where you live and your previous birth experience.

Antenatal Clinic – General Information



The first Booking-in antenatal visit

All women (including those who are doing 'Shared Care') will have their first visit with a midwife at either JHH or a community clinic. This is a comprehensive visit where we will discuss your previous medical history, family medical history, and your general well-being. This is to determine ways we can provide you with appropriate care and support throughout your pregnancy and to ensure your pregnancy care meets your needs.

You can expect your first appointment to take about one and a half hours. Please arrive at the clinic at least 10 minutes prior to your appointment time, this will allow time to complete your paperwork before you see the midwife. Your partner or support person is always welcome at your visits, but due to the length and personal nature of your first visit, we ask that you attend this appointment alone where possible. Your next appointment will be booked before you leave your first visit.

Once you have been allocated to a model of pregnancy care (see pages 10-12), we ask that wherever possible, you ensure your appointments remain on your allocated day with your allocated doctor or midwife. This will help you receive the best care possible.

Booking-in to hospital (admission procedures)

This is different to the antenatal 'Booking-in' visit. All hospital inpatients must complete admission

procedures, including details of Medicare card, any health insurance, next of kin, etc. As pregnant women know they will be inpatients at some time in the near future, it is suggested that these are completed well ahead of the baby's due birth date. A *Request For Admission* form can be completed at all JHH antenatal clinics, including outreach clinics.

Women seeing a private obstetrician may need to visit the JHH Admission desk that is near the front entrance and Information desk.

Specialty Obstetric Care

We have a range of specialist services for women with broader issues that may affect their well-being during the pregnancy, including women with physical or intellectual disability, or concerns with substance use. There are also specialist clinics for women with conditions such as diabetes or heart problems and other conditions that may impact on the pregnancy or the baby's well-being.

These services have staff with expertise in social support, mental wellbeing, counselling, diet, physiotherapy, peer support, and a variety of medical specialties.

If you need support from specialist services, it will be arranged by the midwife completing your booking visit or by the team providing your pregnancy care.

Waiting Times

The Antenatal Clinic at JHH is often very busy. While we make every effort to keep appointment times, the clinic does sometimes run late. We ask for your patience during these times and will endeavour to keep you well informed.

Ultrasound and Pathology Results

Routine antenatal care involves blood and urine tests, and ultrasounds examinations. These test results are made available to you at your next

antenatal visit appointment. All abnormal results that require follow up will be communicated to you by your care provider. We ask that, where possible, that you do not phone for test results.

Students at John Hunter Hospital

The JHH is a major teaching hospital, providing important training opportunities for a wide range of health care professionals. Students are always under the direct supervision of an experienced practitioner. You will be asked permission before a student observes or participates in your care and you have the right to say no. Your wishes will be respected at all times and this will not affect your care.

Our future midwives, the midwifery students are available to share your pregnancy journey with you, and can provide a familiar face throughout your pregnancy, birth and postnatal experience. Speak to your midwife if you would like to be part of this special program.

Research Participation

You may be invited to participate in research projects taking place the John Hunter Hospital. These projects are designed to increase our knowledge about pregnancy, birth and the postnatal period, so that we may improve our services for your care and for women in the future. Participation in research is completely voluntary. The standard of care you receive will not be affected in any way if you choose not to take part.

Overseas Visitors or those who don't have a Medicare card

JHH is a public health care facility. All patients must have a Medicare card. Women not eligible for Medicare benefits will be asked to pay a fee at each visit; this may be reimbursed later by their own Health Insurance Fund.

Options of Care During Pregnancy

Belmont Midwifery Group Practice (BMGP)

If you are a healthy woman with normal risk for medical or obstetric conditions, and interested in continuity of midwifery care, this may be the model of care for you! The BMGP offers women continuous care with a known midwife throughout the pregnancy and postnatal period. You will get to know your allocated midwife and other midwives from the team. Your birth can be at home, at Belmont Birth Service (based at Belmont Hospital, a midwifery-led unit), or if necessary, at JHH. There is no planned postnatal stay in hospital. It is important to note that there are some restrictions placed on the home birth option, including the distance you live from JHH. Please see page 32 for more information on BMGP.

Hunter Midwifery Group Practice (HMGP)

HMGP Midwives also provide continuity of midwifery care for healthy women with normal risk for medical or obstetric conditions. If you choose this model of care, you will be assigned a midwife who will coordinate with you all your care throughout your pregnancy, birth and for 2 weeks after the birth of your baby. While the service is based at JHH, most antenatal care is provided at one of our community antenatal clinics. All the women on the HMGP have their baby at the John Hunter Birth Centre (see page 23), and go home 4-6 hours after giving birth. The majority of postnatal care can be provided in your home.

Midwifery Care with the JHH Birth Centre Team (JHH BCT)

Care with the Birth Centre Team of midwives is also for women with an uncomplicated pregnancy. If you choose this model of care, you will be cared

for by a small team of midwives throughout your pregnancy. Most antenatal visits will be held at the Wallsend Clinic, and we will plan with you to birth your baby in the Birth Centre (see page 23) at the John Hunter. Most women will have met the midwife who cares for them during labour and birth. Postnatal care will be provided by Home Maternity or Postnatal ward midwives.

Shared Care with your GP

Shared care means that you are cared for by your GP in consultation with the hospital doctors and midwives. You will need to come to your nearest Community Antenatal Clinic for a Booking-in visit, and a second visit usually around 36 weeks at JHH. Your baby will be born at JHH Birth Suite. Shared Care enables you to continue seeing your family doctor, who you already know and trust, during your pregnancy, and this may be more convenient for you.

Midwifery Care in Community Clinics

Community Antenatal Clinics make our services more convenient for women to access ongoing antenatal care in their local communities. These clinics are run by midwives and are for healthy pregnant women with normal risk for medical or obstetric conditions. You may choose a Community Clinic near you:

- Newcastle Community Health Centre: Monday to Friday.
- Belmont Hospital: each Monday and Friday.
- Toronto Community Health Centre: each Tuesday.
- Tomaree Community Hospital: each Tuesday.
- Raymond Terrace Community Health Centre: each Thursday and Friday.

Specialist Obstetric Care at JHH Antenatal Clinic

Specialist Obstetricians are best able to care for women who have pregnancies complicated by:

- Had a previous pregnancy requiring specialist care and/or hospitalisation;
- A pregnancy that is not progressing normally;
- A multiple pregnancy, e.g. twins;
- Diabetes and/or other conditions.

M3Team – Care for known complex pregnancies

For some women with certain medical conditions or complicated pregnancies, we offer the option of having care by a team of Obstetricians, other Specialists and midwives. The M3Team will provide your pregnancy care at the JHH Antenatal Clinic. You can enquire about this team at your booking-in visit.

Care with a Private Obstetrician

Women seeing a private obstetrician may birth at the JHH. Women choosing this option of care will see their obstetrician for all their antenatal care in their obstetrician's private consulting rooms. It is important if you choose this care option that you attend an administrative booking visit at the JHH Admissions Office at around 24 weeks pregnant.



Birra-Li Aboriginal Birthing Service

Birra Li provides care for Aboriginal and Torres Strait Islander women, and/or women whose baby will be Aboriginal and Torres Strait Islander. The Birra Li service aims to provide culturally appropriate support and education during pregnancy, after birth and for children up to early school years. This service includes antenatal care, child and family health care, immunisation, child health checks, support service referrals and health education. You may contact the staff at Birra Li directly, or talk to your GP or the staff at the Awabakal Medical Service or antenatal clinic to make a referral to our service

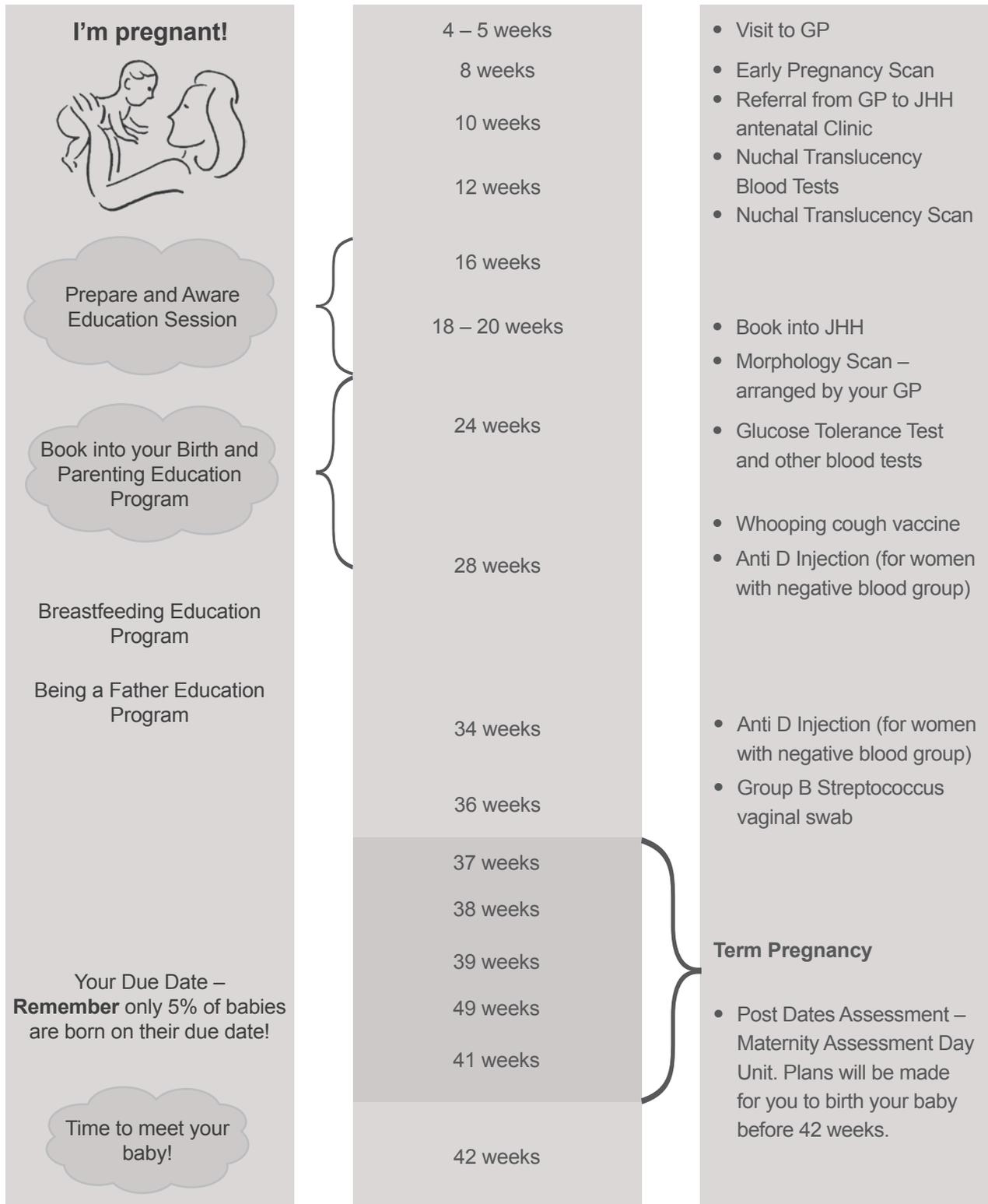
Please contact Birra Li: **(02) 4016 4900**

- If you think you are pregnant or have a positive pregnancy test;
- If you have children between 0-5 years.

Summary Of Models Of Care Available

Options Of Care	Suitability	Who Will Provide Your Antenatal Care	Where You Will Have Your Antenatal Care	Where You Will Have Your Baby	Who Will Provide Care During Labour And Birth	Your Postnatal Care
Belmont Midwifery Group Practice (BMGP)	Women with uncomplicated pregnancy	Known midwife from the BMGP	Home / Belmont Centre / Community Antenatal Clinic	Home / Belmont Birth Centre or JHH Birth Suite	Known midwife from the BMGP	Home within 4-6 hours after birth
Hunter Midwifery Group Practice (HMGP)	Women with uncomplicated pregnancy	Known midwife from the HMGP	Community Antenatal Clinic / Belmont Birth Centre	JHH Birth Centre	Known midwife from the HMGP	Home within 4-6 hours after birth
JHH Birth Centre Team midwives (JHHBCT)	Women with uncomplicated pregnancy	Midwife from JHH BCT	Wallsend Community Antenatal Clinic	JHH Birth Centre	Midwife from JHH BCT	Most choose to go home 4-6 hours after birth; some prefer short postnatal stay in hospital
Shared Care with GP	Women with uncomplicated pregnancy	GP of your choice; Antenatal Clinic midwife at Booking-in and 36 weeks	GP practice; 1 st visit at Community Antenatal Clinic near you; 2 nd visit at JHH	JHH Birth Suite	Midwife from Birth Suite	As above
Midwifery Care in Community Antenatal Clinics	Women with uncomplicated pregnancy	Midwives from JHH Antenatal Clinic	Community Antenatal Clinic closest to your home	JHH Birth Suite	Midwife from Birth Suite	As above
Birra-Li	Aboriginal and Torres Strait Island women or women having an Aboriginal and Torres Strait Island baby	Birra Li midwives and Aboriginal Health Care Workers	Home / Community Antenatal Clinics /JHH	JHH Birth Suite	Midwife from Birth Suite	Home after 4-6 hours may be an option, or postnatal stay in JHH
Care with private Obstetrician	All women	Private obstetrician	Private rooms	JHH Birth Suite	Midwife from Birth Suite	As above
Specialist Care at JHH	Women with pregnancies complicated by medical, obstetric conditions	Medical obstetric teams	JHH Antenatal Clinic	JHH Birth Suite	Midwife from Birth Suite	As above
M3Team	Women with complicated pregnancies	Team of midwives and obstetricians, other specialists	JHH Antenatal Clinic	JHH Birth Suite	M3Team Midwife	Postnatal stay in JHH

Normal Pregnancy Timeline



Please note: this timeline is a general guide only. Individual circumstances may differ.

Pregnancy Support Services

Acute Gynaecology Service (incorporating the Early Pregnancy Assessment Service)

This service is available for women with early pregnancy abdominal pain, bleeding or severe vomiting (up to 18 weeks).

A referral by a medical practitioner (General Practice or Emergency Department) is required for this service. There is no capacity for self-referral.

Multicultural Health Services

The Multicultural Health Unit provides the following services to women from culturally and linguistically diverse (CALD) backgrounds:

- Health Care Interpreter Services

The Multicultural Health Unit provides professional health care interpreters for all women from CALD backgrounds. Health Care Interpreters assist women to communicate with their health professional during antenatal visits, classes, labour, postnatal period and other health-related occasions. If you need the assistance of a health care interpreter please let staff know and they will book one for your appointment.

- MOMS (Mothers, Obstetrics, Multicultural Service) Program

This program offers cultural support to women during pregnancy and up to six months after birth. This support includes linking women from the same backgrounds together to reduce isolation, share experiences, and discuss concerns and issues relating to pregnancy, birth, child care and parenting in a different cultural setting. This helps to identify potential cultural differences in those areas and the need for referrals to relevant health providers and/or community services and groups.

Please let your midwife know that you would like to receive this service, or you can contact the MOMS Service on phone (02) 4921 4497 or email: moms@hnehealth.nsw.gov.au



Aboriginal Liaison Officers

The John Hunter Hospital Aboriginal Liaison Officer is available to assist Aboriginal and Torres Strait Islander patients.

If you or your family require assistance in accessing hospital services, please ask one of our staff members to contact the Aboriginal Liaison Officer for you.

Family Care Midwifery Service

The Family Care Midwives provide a caring and supportive outreach service to mothers with special needs who are attending the antenatal clinic or having Shared Care with their GP. The Family Care Midwife can see you in the antenatal clinic and/or visit you at home, providing individual care during your pregnancy and up to six weeks after the birth of your baby.

The Family Care Midwives can provide education about pregnancy, birth and early parenting. Your midwife can help bring together all the services

you need in your pregnancy, and assist you with any problems that arise at this time.

After you have had your baby, the Family Care Midwives will help you make contact with Child and Family Health Services to provide continuing care when you and your family settle in at home.

Care and Support for women with drug and alcohol problems

Some women may still be using alcohol or taking drugs during pregnancy. It is known that this can be very harmful to the unborn child. A number of skilled, non-judgmental and empathetic staff can provide a range of support. This will greatly improve the chances of having a healthy baby. Other services include the Drug and Alcohol Team and Social Work team.

Providing practical assistance and counselling – Social Work

Social workers are part of the health care team looking after you and your family while you are in hospital. In some situations, the social worker will routinely come to see you during your stay or at the time of your antenatal appointment. You may also wish to contact them yourself. This service is confidential and free.

Social Workers can offer counselling to individuals and families in all areas, including:

- Women or families experiencing difficulties during the pregnancy, such as family breakdown or financial difficulties
- Women or families considering adoption
- Information about community support services

If you wish to contact a social worker, you can contact the Social Work Department directly on (02) 4921 3700 or ask your midwife, doctor or other hospital staff involved in your care to contact a social worker for you.

Promoting Healthy Eating: Dietitians

Both you and your baby need extra nutrients during all stages of pregnancy and breastfeeding. Eating a nutritious diet during pregnancy promotes healthy growth and development for your baby, prepares you for breastfeeding and is important for your own wellbeing. It is important to remember that even though you are eating for two, there is no need to eat twice as much.

A dietitian can assess your diet and suggest any changes that you may need to make. This is particularly important for women who are under- or over-weight, suffer from anaemia or a malabsorption illness such as Crohn's or Coeliac disease, follow a vegetarian diet, or are diabetic.

You can arrange to see the dietitian at the Antenatal Clinic by phoning (02) 4921 3600 for an appointment, or by asking a midwife during your hospital stay.

Helping women to move well: Physiotherapy

A physiotherapist is available to give you advice or treatment on the discomforts that may arise during your pregnancy or after your baby is born. These may include back pain, pelvic pain, pelvic floor weakness, incontinence or abdominal muscle weakness.

If you wish to see a physiotherapist, contact them directly by phoning (02) 4921 3700 or ask your caregiver to contact them for you.

The Parenting Education Service

“Knowledge reduces fear and promotes confidence”

Learning about your pregnancy and growing baby, preparing for labour and the birth of your baby, preparing for the joys and challenges of becoming a parent are all very important parts of your antenatal care and planning.

The John Hunter Hospital Parenting Education Service offers a variety of antenatal education programs to support you and your partner with your physical, mental and emotional preparation for your pregnancy, birth, early parenting and feeding your baby.

The sessions are relaxed and informative, giving you and your support person the opportunity to meet other families and discuss ideas, thoughts and choices for birthing and parenting.

It is important to book your sessions early to ensure you don't miss out on a time that best suits you. You can view our schedule of Parenting programs by going to the link below.

<http://www.hnehealth.nsw.gov.au/HavingABaby/Pages/John-Hunter-Hospital-parenting-education.aspx>

General Information About Educational Programs.

Most courses are held at Newcastle Community Health Centre in Newcastle.

Some courses are held at Belmont Hospital.

Maternity Services Tours are at John Hunter Hospital.

Cost of programs: There are fees for some programs, in line with most Australian Maternity Services. The *Breastfeeding* course is free.

Concessions are available – talk to our friendly staff.

Contact the **Parenting Education Office** now to book your place!

Office hours are: Monday to Friday 9-4pm

Phone: **(02) 4016 4595** or

Email: HNELHD-JHHParentingEducation@hnehealth.nsw.gov.au



Parenting Education Programs

NAME OF PROGRAM	PROGRAM DETAILS	SCHEDULE	WHEN TO COME
Prepare And Aware <i>Pregnant women only</i>	Early pregnancy session: <ul style="list-style-type: none"> Learn about normal changes in pregnancy Exercise in pregnancy & experience a gym workout 	Single 2-hour session One Saturday per month	16 to 28 weeks gestation
Birth And Parenting Program <i>Pregnant woman and partner/support person</i>	Most popular program: <ul style="list-style-type: none"> Self-help strategies for labour and birth, including ways that the support person can offer support to the laboring woman Understanding labour and birth, including when to come to hospital 	Total of 12 hours education Session Options include: 6 x 2 hour 3 x 4 hour 2 x 6 hour	From 26 weeks gestation
Enroll Early (from 18 weeks gestation to book times that best suit you)	<ul style="list-style-type: none"> Making informed decisions about your care, unexpected events of labour and after the birth Breastfeeding, infant sleep, settling techniques, infant communication & other baby care topics. Changes in the family relationships during the period of the transition to parenthood and offer some strategies to minimise distress in the early weeks. 	Monday to Thursday evenings, Saturday or Sundays	
Maternity Services Tour <i>Pregnant woman and partner/support person</i>	<ul style="list-style-type: none"> Organised visit to the Birthing and Postnatal facilities at JHH Led by one of our Parenting Educators. 	1-hour tour Wednesday evening or Saturday afternoon	From 28 weeks gestation
Breastfeeding <i>Pregnant woman, (partners also welcome)</i>	New mothers tell us this was very helpful! <ul style="list-style-type: none"> Observe (via films & discussion) skin to skin contact, baby's signs of readiness to feed, attachment and positioning baby for feeding Common challenges of breastfeeding Learn about local community resources and support 	2½ hour session Friday Morning or Thursday evening	Before 36 weeks gestation
Breastfeeding For Diabetic Mothers <i>Recommended to attend the Breastfeeding course</i>	Especially for pregnant women with diabetes: <ul style="list-style-type: none"> Understand the benefits of breastfeeding both for the diabetic mother and the baby Consider extra practical strategies to help diabetic mothers to breastfeed 	30-minute session following Friday Breastfeeding course	Before 36 weeks gestation
Being A Father <i>For dads to be!</i>	Dads tell us this is excellent, should be longer! <ul style="list-style-type: none"> Explore the role and relationship changes likely to be experienced during transition to fatherhood 	Single 2½ hour session	Before 36 weeks gestation

NAME OF PROGRAM	PROGRAM DETAILS	SCHEDULE	WHEN TO COME
Being A Father (cont)	<ul style="list-style-type: none"> Consider strategies to being an effective support person Develop an effective parenting relationship with your partner Understand infant communications, why babies cry and develop strategies for difficult times 	Thursday evening (same time as Breastfeeding program).	
Next Birth After Caesarean Section <i>Pregnant woman and partner/support person</i>	For women who have had a previous Caesarean birth AND their support person: <ul style="list-style-type: none"> Clarify facts and concerns relating to vaginal birth after Caesarean (VBAC) versus repeat Caesarean birth Help the woman and her partner to make decisions relating to their birth options 	Single 2½ hour session Monthly on Thursday morning or Monday evening	From 20 weeks gestation
Birra Li Maternity Service Birth And Parenting Programs	Aboriginal and Torres Strait Islander parents are welcome to join the programs offered by the Parenting Education Service and/or attend the culturally-specific program held by the Birra Li Maternity Service.	On enquiry 	From 24 weeks
Young Parents Program <i>Woman and her support person</i>	This 6-week program is especially for young parents and their support people, and facilitated by the Family Care Midwives	On enquiry	From 24 weeks
Multiple Miracles <i>Pregnant woman and partner/support person</i>	<ul style="list-style-type: none"> Labour and birth considerations for more than one baby Care and feeding babies in the early days Held collaboratively with the Newcastle Multiple Birth Association 	2½ hour session held monthly	From 24 weeks
Program For Culturally And Linguistically Diverse (Cald) Women: An interpreter from the Multicultural Health Service will assist.	For women and their families who are having their baby in Newcastle for the first time (previous babies may have been born in their homeland or another Australian Centre). This program will offer the opportunity to: <ul style="list-style-type: none"> Visit the Birth Suite and post-natal areas. Care of the mother and baby during labour and birth and feeding baby Share different cultural aspects of birth and early parenting 	On enquiry	
Postnatal Reunions	We offer Postnatal Reunions from your Birth and Parenting program to catch up with your group, introduce your new family member and share stories and experiences	Arranged by your educator	You will be advised by your educator

General Information for Maternity Inpatients

What to bring to hospital when having your baby:

Please bring all you need for yourself and your baby for one day in 1-2 small overnight bags, as space is limited in the hospital.

For the mother:

- Antenatal Record
- You are encouraged to wear your own clothes during labour and birth. A comfortable cotton nightshirt or long T-shirt or sarongs are suitable (you may need more than one if you wish to be covered while in the shower or bath)
- Extra sarong or long scarf to hold heat pack in place as a comfort aid during labour
- Comfortable underwear
- Sanitary adhesive pads
- Maternity bras or “crop top”, breast (nursing) pads (disposable or cloth, not plastic lined)
- Comfortable clothing, suitable when breastfeeding: T-shirts, shorts/trousers or leggings for day wear, pyjamas, nightshirts, dressing gown
- Non slip footwear
- Toiletries, tissues, etc
- Massage oil
- Your favourite food and drink to keep up your energy levels, preferably these should be non-perishable; special foods that require cooling or heating must be carried and stored following Safe Food Handling Guidelines
- MP3 or iPod, with selection of music, relaxation and/or affirmations for different stages of labour; some speakers available, but you may bring your own, labelled (all optional but may be helpful)
- Mobile phone

- Camera or smart phone (still photos only)
- Note pad/ book and pen
- Please leave all valuables at home – there is nowhere to secure them safely in the hospital

For the Support person:

- Wear ‘closed’ shoes for WH&S safety in the Birthing Service
- Change of clothes/board shorts if assisting mother in shower or bath
- Jacket or warm clothing for cool air conditioning
- Snacks and drinks (following Safe Food Handling Guidelines)
- Toothbrush & paste

For baby:

- At least three singlets
- At least three sets of clothing (every day clothes, not good ones!)
- At least three bunny rugs/baby wraps (suggest brushed cotton if cold weather, fine cotton or muslin type if warm weather)
- One packet of cotton buds (for ‘cord’ care)
- Optional: bath solution or baby soap, baby lotion or wipes (just water for baby is fine)
- Disposable nappies will be supplied during your hospital stay
- If you are formula feeding your baby, bring a tin of your choice of infant formula. Sterile bottles and teats will be provided only while you are in hospital
- An approved **baby restraint** as required by law should be fitted to your car; it is strongly suggested that you do this when you are about 34-36 weeks pregnant. If you need help with this, check the **Transport NSW** website for fitting stations located near you.

Mother and Baby Care Boards

Near each bed you will notice a **Mother and Baby Care Board**. We use these boards in all ward areas across the hospital to communicate the daily and anticipated plan for care between the woman, the family and carer and healthcare team.

Ward staff will update the board each shift, and you or your family or carer can write comments and questions on it at any time. If you have any questions regarding your care board, please ask one of our staff members. For your safety, we want to work together to plan your care and know what is important to you.

PLEASE INFORM US WHEN YOU LEAVE THE WARD

We need to check if there is anything we should do for you before you go, and confirm what time you plan to return.

REACH: Recognise, Engage, Act, Call, Help

If you or a family member becomes concerned about your condition while in hospital:

- Have you spoken to your midwife or doctor?
- Have your concerns been answered?
- Are you still concerned?

If so, ask your midwife for a **'Clinical Review'**, or you can dial **0423 848 420** to call an emergency response.

A REACH poster will be displayed beside your bed with this information.

Clinical handover

At John Hunter Hospital we aim to provide excellent healthcare for every woman, every time. An important part of this commitment is staff performing a clinical handover at the bedside every shift.

At the handover, the midwife who has been caring for you provides information regarding your care and reason for your admission to the midwife who will be looking after you during the next shift.

The staff will involve you in this process, which will allow you to participate in the planning of your care and ensure that the information that is exchanged is accurate. You will also have an opportunity at this time to ask any questions regarding your care.

Hand Hygiene

To help prevent infection the following rules are for all visitors to the John Hunter Hospital:

- Gel hands on entering unit
- Gel hands on entering patient's room
- Gel hands on exit from patient's room
- Inform staff if you are unwell

The form is titled "Mother & Baby Care Board" and is divided into several sections. At the top, it has fields for "Day", "Date", "Bed number", and "Core team". Below this, there are sections for "Mother's name", "Baby's name", and "Partner's name", each with a corresponding "Mobile" or "NCS" field. There are also fields for "Expected date of discharge" and "Expected time of discharge". A "Plan" section is labeled "Today's plan". At the bottom, there is a "Communication" section for "Family/carer's questions or comments" and a "Mother's requests for today" section. The form is branded with "EXCELLENCE Every patient. Every time." and "John Hunter Hospital" logos.

The poster is titled "For your safety" and contains the following text: "We want to work together to provide care that meets your needs." Below this is a button that says "Please inform us when you leave the ward". The next section says "We need to check if there is anything we should do for you before you go and confirm what time you plan to return." followed by "Thank you" and a button that says "Keep us informed Together we make a great team". The next section is titled "Are you concerned about your condition or the person you care for?" and contains three checkboxes: "Have you spoken to your nurse, midwife or doctor?", "Have your concerns been answered?", and "Are you still concerned?". Below these is a button that says "Ask your nurse or midwife for a Clinical Review or dial 0423 848 420 to call an emergency response". At the bottom is a button that says "Reach out to us if you are concerned Together we make a great team".

Providing a safe environment for clients and staff

Creating a safe environment for patients, visitors to our hospital and our staff is our priority. Any behaviour which compromises the safety of mothers and babies will not be tolerated. Any behaviour which disrupts the ability of our staff to fulfil their duty of care will also not be tolerated.

Should any person display such behaviour they may be asked to leave.

Security

The hospital has a lock down period between 9pm and 5.30am. During these hours, entrance and exit to JHH and Belmont Hospital is through the main entrance only.

Security cameras are located in most areas throughout JHH & Belmont hospitals.

Belongings and Valuables

To minimise the chance of misplacing your belongings it is helpful if your items are marked with an identifying label, especially valuables such as glasses and phone chargers.

We do our best to ensure all private items are returned to you if misplaced but we cannot take responsibility for lost items. Valuable items are best left at home for safekeeping. There is no secure environment on the wards to store valuable items.

Car Parking

Car parking is available at John Hunter and Belmont Hospitals for a set fee.

Car parking is also available at community clinic venues. For Newcastle Community Midwifery clinic, free car parking is available at a nearby shopping centre for up to three hours.

Visiting Hours

John Hunter Hospital has an open visiting policy. We acknowledge that new mothers need rest and so we encourage a rest period on the wards between 1pm and 3pm each day.

The majority of our beds are in four-bed rooms, so when visiting we ask that you are mindful of this quiet period for your family member and for other women and babies on the ward.

We also request that visitors are up-to-date with the whooping cough vaccination when visiting new babies, and if feeling unwell with colds and flu-like illness, please avoid visiting new mothers and babies.

Mealtimes

Meal times are approximately:

- Breakfast 7.30 to 8.30 am
- Lunch 12.30 pm.
- Dinner 5.30 pm to 6 pm.

A small kitchen is located on each ward with tea, coffee making facilities, ice machine, refrigerator, toaster and microwave. These items are available for your convenience.

Please be mindful of safe food handling practices at all times.

For the safety of you, your baby, visitors and our staff, we ask that all curtains in the ward areas are open at all times when appropriate, especially mealtimes to allow the safe distribution and collection of meal trays.

Smoke Free Health Service

John Hunter Hospital and Belmont Hospital are smoke-free health services. Smoking is not

permitted in the hospital or on hospital grounds. The midwife caring for you will assist you with smoking cessation support if required.

Televisions

Televisions are available for your use at each ward bed at no cost. The television service includes all major television channels, and maternity education channels including baby bath demonstration, breastfeeding, care of your baby, parental bonding with baby, and introducing your baby to the family dog or cat.



Yamma, Welcome to John Hunter Hospital Video

The “Yamma” video is a resource aimed at orientating Aboriginal and Torres Strait Islander patients to our facility. If you would like to view the video, it is available on all patient TVs on Channel 110 or view the **Yamma Video** here or via this address <http://www.hnehealth.nsw.gov.au/facilities/hospitals/Pages/John-Hunter-Hospital.aspx>

Other Services Available

Chaplaincy and Pastoral Care

Hospital Chaplains and Pastoral Carers are available to all patients and visitors. Please ask one of our friendly staff to contact the service if required. The JHH Chapel is located near the main entrance and is open at all times. Chapel services are held on a regular basis, the times of which are advertised in the chapel and on the Pastoral Care brochure.

Pharmacy

The hospital pharmacy is located near the main entrance on Level 2, outside the Outpatients Clinic, and is available to all patients to fill their scripts for discharge. Doc's Pharmacy is a commercially operated pharmacy for non-hospital scripts and pharmaceuticals. It is located in the food court on Level 2.

Newsagency

JHH News and Gifts Newsagency is located on Level 2 to the right of the hospital's main entrance. Cards, gifts, confectionery, phone cards and lottery services are available.

Places to eat

There are a number of places to eat on the John Hunter Hospital Campus.

Grab and GoGo Café is located on Level 2, inside near the main entrance. Sandwiches, drinks (hot and cold), confectionery and hot meals are available.

Baratza Coffee Shop is located at the west end of Level 2. Drinks (hot and cold) and confectionery are available.

A larger Food Court is located at the eastern end of Level 2, with a sandwich bar and many hot food and beverage options are available.

Financial services

An ATM is located at the main entrance of the hospital on Level 2 opposite the Information Desk.

Gift Shop

KC's Gift Shoppe is located near the main entrance on Level 2. It is run by John Hunter Hospital Site Carers (hospital volunteers) and has gifts, toiletries and confectionery available.

Accommodation for Families

JHH has limited accommodation available for relatives travelling long distances (greater than 100km). These units provide a comfortable environment and close by accommodation for relatives of patients who require treatment and care at JHH. Please ask our friendly staff who can assist with your enquiry.

Birth Suite and Birth Centre

The JHH Birth Suite and Birth Centre are located together on level 3 at JHH.

The Birth Suite, formerly known as Delivery Suite or Labour Ward, cares for women with normal to high risk of obstetric or medical conditions occurring, and while supporting normal labour and birth, staff in Birth Suite can provide extra monitoring of mother and baby or extra interventions if required.

The Birth Centre is an area for healthy women with normal risk of medical or obstetric conditions, where normal labour and birth are supported by her partner and midwives, with easy access to further help if required.

When you arrive at JHH, go straight to the Birth Suite reception desk. You will be met by a midwife or receptionist and taken to an available room that best suits your needs, or to the waiting area of the Maternity Assessment Day Unit.

Virtual Tour of JHH Maternity Services

Visit our **website** to see a virtual tour of the Birth Suite, Birth Centre, Maternity Assessment Day Unit, antenatal and postnatal wards at John Hunter Hospital, as well Belmont Birthing Service.

Google: 'having a baby at JHH'.

Maternity Assessment Day Unit (MADU)

The MADU is an area where pregnant women may be directed to go following an antenatal clinic visit, or after speaking with a midwife in Birth Suite. Reasons may include: being more than 41 weeks pregnant, waters leaking after 37 weeks and not in labour, high blood pressure, and other events. While in MADU, a comprehensive assessment will be undertaken, and this could take about 4 hours. When you are ready to birth, or require closer

monitoring, you will be transferred to the Birth Suite. Alternatively, you may be discharged home from MADU with a follow up plan of care.

Travelling to have your baby in hospital

- Contact the midwife in the Birthing Service (or your own midwife as arranged) for advice.
- Wear a sanitary pad (or more!).
- Have your support person drive safely, and use your seat belt with lap belt positioned below your baby. Have old towels available to catch leaks if they occur, and an old ice-cream bucket in case of nausea or vomiting.
- In NSW, an ambulance ride can be very expensive; it is strongly suggested that you join an ambulance fund for your family emergency situations, if you are not already covered by private health insurance (this may be done through any major private health fund office or online).
- Bring your antenatal record. Your antenatal record provides us with your history and plan of management for labour and birth. Please carry it at all times, and present it to the midwife or receptionist on your arrival to the Birth Suite.

A plan for going home after birth

For most women, pregnancy and birth is a healthy experience. Many women choose to go home from the hospital soon after the baby is born, and take advantage of our **Home Midwifery Service (HMS)**. This is dependent on both mother and baby being well, baby has had the first feed, and mother is confident going home with adequate family support. You can go home straight from Birth Suite/ Birth Centre. A physical examination of mother and baby will be done before you leave. All the necessary documents and supportive information will also be provided. The midwife from

the HMS or Midwifery Group Practice will contact you the day after your discharge and inform you of an approximate time for your home visit. They may visit you for up to about 5 days after birth, depending on your circumstances.

Husband/ partner/ support persons in labour and birth

We welcome people who will support and encourage you throughout labour and birth. There is room for a maximum of two support people at any one time in the Birth Suite.

Doulas

It is the woman's choice who supports her during pregnancy, labour, birth and the postnatal period. A doula is a layperson, identified by the woman, who provides continuous support during the antenatal period, childbirth and the postnatal period. The doula attends as an employee of the woman. Under normal circumstances each woman is able to have two support people with her in Birth Suite. A doula is to be considered one of the two support people.

Hunter New England Local Health District (HNELHD) is open to the use of doulas at birth, and maternity services will facilitate a productive, receptive environment for doulas to support women. However, HNELHD clearly states that it does not accept responsibility and is not accountable for any actions or advice given to labouring women by doulas.

Visitors

If there are some visitors you would like to visit you soon after the birth of your baby in the Birth Suite, we request that your visitors check at the Birth Suite desk before proceeding to your room. This is to protect your privacy and the privacy of other women in the unit. Please be aware that there is no waiting room for visitors in the Birth Suite.

Enquiries while in Birth Suite

To protect your privacy and confidentiality, information is not given to people enquiring about you without your consent. We will take messages for you to contact the enquirers at a convenient time.

Video recording and photography

We respect your wish to film labour and birth. However, all staff have the right to refuse to be identified on film or refuse filming during specific procedures. Please inform your midwife of your intention to film. If your baby is born in the Obstetric Operating Suite, only still photographs may be taken.

Music for labour

Within each Birth Suite room there maybe a blue tooth speaker available for you to play your own music using your own device. Alternatively there is a radio/CD player available. You are also welcome to bring your own speaker dock for your smartphone if you would prefer.

Children

There are no childcare facilities at JHH or the Birth Suite. If you wish to have your children present for labour and birth, we request you have one adult, other than your main support person to care and supervise. However, the limit of two additional people at a time will also need to be considered.

Mobile phones

We ask that all mobile phones are turned to silent mode in the Birth Suite, Birth Centre and ward environments.

Keeping baby with you following birth

Your baby will remain with you following birth. Skin-to-skin is encouraged for a minimum of 1 hour after the birth or until the first breastfeed. Skin-to-skin contact stimulates the mothers' production of the oxytocin hormone, which decreases bleeding, promotes bonding and breastfeeding. It allows the baby to smell, touch and know mum as well as stay warm. When the baby shows signs of readiness, he/she will be able to breastfeed.

It is strongly suggested that during this important time the baby stays with mum, rather than being handed around to other family members. The father of the baby has an important role in protecting the new mother and baby.

After your baby has fed, he/she will be weighed and measured. With your consent, Vitamin K (*Konakion*) and Hepatitis B vaccine injections will be given at this time.

Two arm-bands with the baby's correct identification details will be placed on the baby's arm and leg – the midwife will ask you to check these details to ensure they are accurate.

The arm-bands are routinely checked by the midwives. Should the arm-bands fall off, please tell the midwife as soon as you can so that new arm-bands can be provided.

If medical treatment is required for your baby, then he or she may be taken to the Neonatal Intensive Care Unit or Special Care Nursery adjacent to the Birth Suite. As soon as possible, you will be able to visit and care for your baby.

What happens to the placenta (afterbirth)?

After the birth of your baby, the placenta will be disposed of in accordance with NSW Health Guidelines.

On some occasions the placenta may be sent to the Pathology Department, for extra information. This may happen if you gave birth to twins, or if you or your baby has a serious medical or obstetric condition.

If you would like to take your placenta home please talk to your midwife.

Stem cell collection and storage

If you are interested in the collection of stem cells from your baby's cord blood for possible future use, you need to organise this with one of the private companies several weeks before coming to hospital to birth your baby. You will need to organise the collection, equipment, courier service and storage with the private company.

Antenatal Unit

Some women will require admission to hospital during their pregnancy for their health or the health of their unborn baby.

In the Antenatal Ward, we aim to make your stay as comfortable as possible. Our team of midwives will care for you throughout your stay. Our team of staff doctors will visit you daily and develop a plan of care for you. If you are under the care of a private obstetrician, he/she will visit you on the ward.

The circumstances that led you to the Antenatal Ward may cause you some stress; for example, you may have been transferred from another hospital or may be facing a long stay due to difficulties with your pregnancy. Please discuss these issues with your midwife. We have additional staff who may offer you support to meet your needs.

Located on the wall at each bedside you will find a patient care board which is a useful communication tool between you or your family and your care providers. Here you can write down questions, your midwife can write down what is happening for that day or perhaps you can write down reminders for questions to discuss with your doctor.

The antenatal ward has mostly four-bed rooms, which limits the ability of other families to stay overnight. There are a small number of single rooms available, which are usually reserved for women with specific medical needs.

We encourage expectant mothers to have a rest period between 1pm and 3pm each day. You may like to communicate this to your friends and family.

Your midwife and staff from the Parenting Education Service are available to offer education and discuss a range of topics with you. This may be either a one to one or group session. There are a range of educational resources available to support your learning. Arrangements can also be made to see a lactation consultant. Talk to your midwife or use your patient care board as a reminder to staff. Tours to the Neonatal Intensive Care Unit (NICU) can also be arranged.

While an inpatient on the ward, please inform staff if you intend to leave the ward area for any reason and advise them of your estimated time of return.

This helps us to keep you safe and provide you with the best care possible.



Postnatal Unit

Please also refer to the General Information for Maternity Inpatients.



During your stay on the postnatal ward, you will be supported by midwives who will assist you to develop the skills to care for your baby. There are educational films on the hospital television as well as inpatient education sessions on the ward such as baby bathing demonstration. These are all great opportunities to gain confidence as new parents.

When you first arrive to the postnatal ward, the midwife caring for you will discuss a plan of care for your stay including discharge planning.

Accommodation options

Within hours of birth, you and your baby may go home if you are both well and your baby has fed. This enables you to be cared for in the comfort of your own home with supportive midwifery care provided by regular visits from the Home Midwifery Service (HMS) (see page 29). If you choose or need to stay in hospital, your care will be provided in the hospital's postnatal unit (Ward K2). For most women, pregnancy and birth is a healthy experience, which does not necessitate a long stay in hospital.

The postnatal ward at John Hunter Hospital has mostly shared four-bed rooms. This means that family members are unable to stay overnight with the mother and baby. There are a very small number of single rooms available. Women with more complicated postnatal stays are allocated to the single rooms as first priority. We also attempt to meet the needs of women who have private health insurance by offering a single room whenever possible.

Rooming-in

It is important not to separate mothers from their babies, so mothers keep their baby at the bedside with them, 24 hours a day. The midwives will assist and provide support with all aspects of baby's care. Please ask for assistance if required. There is also a Mother and Baby Care Board near each bed which is a very useful way to request support. We also ask that this board is used to communicate with the staff if you are leaving the ward for any reason. We request that you write your mobile phone number and the approximate time of your return to the ward.

Feeding your baby

The midwives caring for you are able to give assistance, support and advice with breastfeeding. If additional help is required, the midwife caring for you will make arrangements for you to meet the lactation consultant midwife.

If you are artificially feeding your baby, you will need to bring a tin of your choice of infant formula with you, to use in hospital.

Support for breastfeeding your baby when you go home:

- **Home Midwifery Service** midwives will provide assistance during the first few days (see page 29).
- **Breastfeeding Clinic** is available for women with a baby less than 4 weeks old. For appointments please telephone: **4016 4595**.
- **Kaleidoscope (Child and Family Health Nursing Service)** also provide Breastfeeding Clinics in the community.
- **Child and Family Health Nurse** provides long-term ongoing feeding and parenting support. You will be linked to this free service before discharge from our maternity service.
- **The Australian Breastfeeding Association (ABA)** provides breastfeeding support in the community. 24-hour phone number: 1800 6862686 (1800 MUM 2 MUM); while membership supports this valuable organisation, non-members can still receive support
- Look for *Who Can I Call?* in your postnatal pack for useful phone numbers.



Physiotherapy after your birth

A physiotherapist will see you for individual advice and exercise instruction following the birth of your baby, while in hospital or as an outpatient. For further information, phone physiotherapy on **(02) 4921 3700**.

Routine screening for your baby

Routine screening as outlined in the **NSW Health *Having a Baby*** book will be done in the early postnatal days.

A physiotherapist will examine your baby's hips to check for any hip problems.

You will be offered a **screening test for hearing** for your baby soon after birth. About one to two babies out of every 1000 will have a significant hearing loss. This screening program is called the NSW State-wide Infant Screening Hearing program (SWISH), and is available in the postnatal ward or at your local Early Childhood and Family Centre if you go home early.

Newborn Bloodspot Screening will be done between 48-72 hours by your midwife or a pathology technician.

Transport for going home

Please plan for your transport home. You will need an approved baby restraint fitted to your car. Ideally this should be in place around 34-36 weeks pregnant. The **Transport NSW** website can help you locate a fitting station near you.

Discharging Home

Discuss with your midwife your needs for discharge. Ensure that you arrange on the previous evening for someone to collect you.

Please note: Discharge time on the postnatal ward is between the hours of 9am- 10am.

Home Midwifery Service (HMS)

For most women, pregnancy and birth is a healthy experience. We understand you need to share this exciting time with your family. Rather than stay in hospital after your baby is born, you may prefer to take advantage of our free Home Midwifery Service (HMS).

If you are from out of area and choose to go home early, discuss your options with the midwife caring for you, alternate arrangements can be organised for you to have postnatal follow-up.

The HMS midwife will:

- visit you in the comfort of your own home giving you one-to-one advice and support;
- visit between 9.30 am and 4 pm;
- text message you on the morning of your planned home visit with an estimated time of arrival;
- support you with feeding your baby;
- advise you on helping your baby to sleep;
- support with caring for your baby, eg: bathing
- weigh your baby;
- perform blood tests for your baby;
- complete your postnatal check;
- provide you with support and reassurance;
- put you in contact with the Child and Family Health Nursing Service

You may choose to use this service directly from the Birth Suite or within a couple of days of having your baby.

Mothers with babies in NICU

Sometimes babies requiring care in the NICU may need a longer hospital stay than the mother. In these instances the mother will be discharged from hospital before the baby.

For families who live out of area, limited accommodation may be available at Ronald McDonald House, which is located on the grounds of JHH. Please discuss these options with the staff on the postnatal ward or in NICU.

safe sleeping

Six ways to sleep baby safely and reduce the risk of sudden unexpected death in infancy:

- Sleep baby on back
- Keep head and face uncovered
- Keep baby smoke free before and after birth
- Safe sleeping environment night and day
- Breastfeed baby
- Sleep baby in a safe cot in parents' room

red nose
saving little lives 1300 308 307 | rednose.com.au

QR code

Keeping You And Your Baby Safe While In Hospital – Preventing Falls

Sometimes mothers to be and new mothers can fall while in hospital and cause injury particularly if they are tired, or if they have recently had an anaesthetic (including an epidural), pain medication or heavy bleeding or if the mum to be or new mum has other medical conditions such as low blood pressure, epilepsy or diabetes.

We request that you:

- Use your call bell if you require assistance
- Wear safe footwear at all time
- Take your time when moving about
- Use a shower chair when showering
- Use a light as required during the night time.

It's important also to keep your baby safe from falling. We ask you to ensure that your baby:

- Is placed on their back to sleep and placed in their own cot placed next to your bed
- Is never left unattended on an adult bed or other surface from which they can fall
- Is always in their own cot while being transported. ***Walking around with your baby in your arms is not encouraged.***

We Do Not Encourage Sleeping With Your Baby As Babies Can Fall Or Have Sleep Accidents

Please ensure that visitors are aware of these important factors to keep your baby safe.

We recognise that babies like to feel safe in their mum's arms, but sometimes tired mums can fall asleep with their babies and babies can then easily fall from their mums' hold. We ask that you avoid all of these situations that place your baby at risk of falls.

REMEMBER the safe sleeping SIDS prevention = Baby on back, in own bed, feet at end of cot, smoke free environment, no hats or bonnets, and breastfeed your baby.

Postnatal Timeline

TIME AFTER BIRTH OF BABY	CARE FOR BABY	CARE FOR MOTHER
Birth day	Vitamin K (<i>Konakion</i>) Immunisation – Hepatitis B Newborn baby check <ul style="list-style-type: none"> • By midwife or doctor 	Consent required
1-5 days	Hearing check <ul style="list-style-type: none"> • By State-wide Infant Hearing Screening Service (SWISH) • May be an outpatient appointment 	Consent required
1-5 days	Hip check <ul style="list-style-type: none"> • By obstetric physiotherapist • May be an outpatient appointment 	
48-72 hours	Newborn bloodspot screen <ul style="list-style-type: none"> • National screening for all babies for many treatable medical disorders • Heel prick by midwife or pathology technician • May be done at home by midwife 	Signed consent required
5-28 days	Breastfeeding Clinic <ul style="list-style-type: none"> • Outpatient appointment with JHH Lactation Consultant for mothers and babies with breastfeeding challenges 	
Approx 2 weeks	Home visit by Child and Family Health Nurse (C&FHN) <ul style="list-style-type: none"> • Free NSW program for all families provides ongoing feeding and parenting support, including emotional as well as routine baby checks • Link made to C&FHN service before discharge from the maternity service 	
2 weeks	Visit your GP <ul style="list-style-type: none"> • Baby check 	<ul style="list-style-type: none"> • Mother might discuss contraception or other issues
6 weeks	Visit your GP <ul style="list-style-type: none"> • Baby check • Immunisation for baby 	<ul style="list-style-type: none"> • Postnatal check • Cervical screening test (CST) • Contraception discussion

Belmont Midwifery Group Practice (BMGP)

Some information about Belmont Midwifery Group Practice (BMGP) is listed on page 10 and 12.

The following provides further details for you to consider.

The Belmont Midwifery Group Practice is a service which provides women centred care through pregnancy, birth and for up to two weeks after the birth of your baby. Belmont Birthing Service is a free-standing birthing unit located on the second floor of Belmont District Hospital, Croudace Bay Road, Belmont. It is staffed by a team of midwives who offer holistic and expert midwifery care.

The philosophy for BMGP is to provide continuity of midwifery care for women and their families. The midwives at Belmont believe that pregnancy, birth and becoming parents is a normal life event, and they will help to prepare you to achieve an active labour and birth.

The service provides a warm, family-friendly low technology environment. You will be allocated a primary care midwife who will care for you throughout your pregnancy, birth and for up to two weeks at home. If at any time your primary midwife is on leave you will be cared for by another midwife in the BMGP team. You will get to know most of the midwives in the team. You may also choose to see your GP for your routine pregnancy blood tests and scans.

Belmont Midwifery Group Practice is staffed by experienced midwives who consult and collaborate with an Obstetrician as required

This service is available to women who have a healthy pregnancy with normal risk of obstetric or medical conditions. The midwives at your booking visit will discuss with you whether this is a suitable option.

Belmont Midwifery Group Practice offers:

- Birth at the Belmont Birthing Service.
- A public health funded homebirth service: some women who book to have their babies under the care of BMGP choose to have a planned homebirth with the care and support of Belmont midwives. If this is an option that interests you, please ask your midwife at Belmont for more information. There are some restrictions including set geographical boundaries that we are happy to discuss with you
- Allocation of an experienced midwife as your primary carer
- Supportive care by a small team of midwives working with your primary midwife
- Flexible appointment systems
- Comfortable, relaxed and calm surroundings including baths for water births
- Support and promotion of natural ways to manage the sensations of labour, remembering that when women are relaxed and feel supported by someone they know and trust, they manage labour well with their own pain-relieving hormones
- 24-hour access to phone advice by a BMGP midwife
- Provision for postnatal care for four to six hours in the unit, and up to two weeks in your home

Obstetric medical officer services are not provided onsite.

(Please read next page).

If you require referral to an Obstetrician for ongoing care during your pregnancy:

Some women do unfortunately develop conditions during their pregnancy which are better managed by an Obstetrician.

If these conditions develop **before 37 weeks of pregnancy**, your primary midwife is required to handover your care from the BMGP to a doctor and other members of the maternity team at JHH. BMGP will be unable to care for you during labour, birth and the postnatal period.

However, women who develop reasons for

needing medical care **after they reach 37 weeks** will be provided ongoing care by the BMGP in partnership with the medical staff at JHH. They will be supported by the BMGP to have their baby at JHH.

The BMGP welcomes your enquiries. Tours of the unit can be arranged. Belmont Midwifery Group Practice can be contacted by phone on **(02) 4923 2108**.

A Final Word

The management and staff at John Hunter Hospital wish you and your family all the best for a healthy future.

If you have any questions or suggestions for improving the services we provide, including this booklet, a patient feedback form is available online:

<http://www.hnehealth.nsw.gov.au/Feedback/Documents/HNELHD-feedback-form-web.pdf>

If you have any concerns regarding your care or experience here at John Hunter we recommend you discuss your concerns with the manager on duty in the first instance, or you can contact the Patient Representative on (02) 4921 3661.

Acknowledgements

This publication was produced by staff from the Maternity and Gynaecology Service, John Hunter Hospital, Newcastle, NSW, in April 2017.

Thanks to the members of our general community who provided valuable feedback and editing suggestions during the pre-production phase.

© Copyright 2017. This document is the subject of copyright vested in Hunter New England Local Health District.

Index

Aboriginal Birthing Service – Birra Li	11	Complex care during pregnancy	11
Aboriginal Liaison Officers	14	Concern about condition of mother or baby	20
Accommodation for families	22	Contact phone numbers	6
Accommodation for inpatients	27	Dieticians	15
Acknowledgements	33	Discharging home from hospital	28
Acute Gynaecology Service (inc. Early Pregnancy Assessment Service)	14	Doulas	24
Afterbirth (placenta)	25	Drug & alcohol, care for women with	15
Ambulance for travel to hospital	23	Early Pregnancy Assessment Service (EPAS)	14
Antenatal classes	16	Enquiries while in Birth Suite	24
Antenatal Clinic – General information	8	Falls prevention –mother & baby	30
Antenatal record	23	Family Care Midwifery Service	14
Antenatal Unit	26	Feeding your baby	27
Antenatal Ward	26	Final words	33
ATM (Automatic Teller Machine)	22	Financial services	22
Babies in NICU	29	First Booking-in visit	8
Baby Friendly Accredited Hospital	7	General information – Antenatal Clinic	8
Baby car restraints	19	General information – maternity inpatients	19
Baby safety in hospital	30	Gift shop	22
Belmont Midwifery Group Practice (BMGP)	10, 32-33	Going home early after birth	23
Belongings and valuables	21	Hand hygiene	20
Birra-Li Aboriginal Birthing Service	11	Hearing check for baby	28, 31
Birth Centre	23	Helping women move well: Physiotherapy	15
Birth Centre Team JHH	10	Hip check for baby	28, 31
Birth Centre Team Midwifery Group Practice (BCTNGP)	10	Home Midwifery Service (HMS)	23, 29
Birth Suite	23	Husband, partner, support persons in labour and birth	24
Booking-in admission procedures	8	John Hunter Hospital Maternity Service	5
Booking-in antenatal visit	8	JHH Birth centre team	10
Cafés	22	Keeping baby with you after birth	25
Car parking	21	Keeping you and your baby safe in hospital	30
Car restraints for baby	19	M3Team	11
Care & support for women with drug & alcohol problems	15	Maternity Assessment Day Unit (MADU)	23
Care Boards (Mother & Baby)	20	Maternity inpatients – general information	19
Care with a Private Obstetrician	11	Mealtimes	21
Chaplains and pastoral care	22	Midwifery Care in Community Clinics	10
Children in Birth Suite	24	Midwifery Care - JHH Birth Centre Team	10
Clinical handover	20	Mobile phones	24
Coming prepared: your antenatal record	23	Models of pregnancy and birthing care	10-12
		MOMS	14
		Mother & Baby Care Boards	20

Mothers with babies in NICU	29	Safe sleeping for baby	29
Multicultural Health Services	14	Safety for clients and staff	20, 21
Music for labour	24	Security	21
Newborn bloodspot screening	28, 31	Shared Care with your GP	10
Newsagency	22	Smoke-free Health Service	21
NICU babies – mothers	29	Social Workers	15
Normal pregnancy timeline	13	Specialist obstetric care at JHH Antenatal Clinic	11
Now that you are pregnant	8	Specialty obstetric care	9
Nutrition support	15	Stem cell collection & storage	25
Options of care during pregnancy	10	Students at JHH	9
Overseas Visitors & those without a Medicare Card	9	Summary of models of care	12
Parenting Education programs	17	Support for breastfeeding when you go home	28
Parenting Education Service – general information	16	Support persons during labour	24
Parking for cars	21	Televisions	22
Partner support during labour & birth	24	Timeline – pregnancy	13
Pharmacy	22	Timeline – postnatal	31
Phone numbers	6	Transport for going home	28
Photography & video recording	24	Travelling to have your baby at hospital	23
Physiotherapy	15	Ultrasound & pathology results	9
Physiotherapy after your birth	28	Video recording & photography	24
Placenta	25	Virtual Tour of JHH	23
Places to eat	22	Visiting hours	21
Plan for going home early after birth	23	Visitors to Birth Suite	24
Postnatal Unit	27	Waiting times at antenatal clinic	9
Postnatal Timeline	31	What happens to the placenta (afterbirth)	25
Practical assistance & counselling: Social Work	15	What happens & when during normal pregnancy	13
Pregnancy Support Services	14	What to bring to hospital	19
Pregnancy Timeline	13	When you should contact the hospital	6
Preventing falls for mothers and babies	30	<i>Yamma</i> , Welcome to JHH video	22
Private obstetrician care	11		
Promoting healthy eating: Dieticians	15		
Providing a safe environment for clients and staff	21		
REACH: recognise, engage, act, call, help	20		
Research participation	9		
Results – ultrasound, pathology	9		
Rooming-in with baby	27		
Routine screening tests for your baby	28		

