This guide answers the questions you may have about NHS Maternity Services in Grampian

Guide to NHS Grampian Maternity Services

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If you think you might be pregnant, the best way to confirm your pregnancy is to:

- Buy a home pregnancy test kit, available in supermarkets or chemists/pharmacies. The result of these test kits are usually accurate. If you have a positive pregnancy test, please contact your GP Practice and ask for an appointment with a midwife.

**Antenatal care (pre-birth care)**
Being pregnant is an exciting and special time and our health care professionals will strive to offer you the best possible care so that your pregnancy is a happy, positive experience. In Scotland, all pregnant women are encouraged to have regular antenatal care. This means you and your unborn baby will be checked regularly to ensure you are well and the pregnancy is progressing satisfactory.

Antenatal care is provided in a variety of settings, e.g. Health Centres, GP Practices, Maternity Hospitals, Maternity Units, Birthing Units and sometimes at home. All pregnant women in Grampian hold their own pregnancy records. The lead health professional who is responsible for your care during your pregnancy is a midwife.
Who will care for you?
Every pregnancy is different and you will meet a variety of professionals who will work together as a team to ensure all your health and pregnancy needs are met.

A **Midwife** is a trained professional who has undergone specialist training to care and support women, their partners and families, before, during and after child birth. The midwife will provide information on antenatal care which will be tailored to meet your individual needs and wishes. This will help you make informed choices about all aspects of your care and the birth of your baby (e.g. choice of birth method and place of birth).

At your first appointment, the midwife will ask you about your health, family health history and any previous births. You can also give them any other information that you feel is important for the midwife to know. You will also receive some excellent written health promotion information (e.g. Pregnancy Record Book, Ready Steady Baby) that are offered to all pregnant women in Scotland. The Pregnancy Record contains information about every appointment you have with a health care professional. It is a complete record of your antenatal care.

A **General Practitioner (GP)** is your local personal NHS doctor. Your GP will continue to care for your other health needs during your pregnancy and sometimes can help plan your antenatal and postnatal care.
An Obstetrician is a specialist doctor trained to care for women during pregnancy and childbirth. Your midwife or GP may refer you for an appointment with an Obstetrician if they have a particular concern about your pregnancy. If you are healthy and your pregnancy does not have any problems, you do not need to see an Obstetrician and your care will remain with your midwife. However, in some hospitals, it is routine to see an Obstetrician.

A Health Visitor is a trained nurse with additional specialist qualifications in child development and child care. They work closely with the midwife and GP as part of the team specialising in caring for you and your baby after your baby is born. The health visitor will provide information and guidance on child health development, immunisation, baby clinics and breastfeeding.

Other members of the team who may be involved in your care include Dietitians, Physiotherapists, Paediatricians, Anaesthetists, Hearing Screeners, Social Workers, Chaplains and supervised trainee midwives in both hospital and community settings.

Please note that the health care professional who will look after you may be either male or female. If your faith, religion or culture requires you to be seen by a healthcare professional of the same sex, please let the midwife know.
Antenatal visits by your midwife
At each antenatal visit, your midwife will check your blood pressure, test a sample of your urine and assess the growth of your baby. In later pregnancy, they will determine what position the baby is in and listen to the baby’s heartbeat.

A series of tests may be offered to you during pregnancy. Your midwife will discuss all tests with you and it will be your decision whether or not you wish to proceed with them.

Screening test and diagnostic test
A screening test is designed to let you know if there is risk in your pregnancy. A diagnostic test is done to show whether a problem actually exists. Some mothers may be offered additional tests.

Routine and screening tests
In early pregnancy, the following tests and check-ups will be offered:

- **Blood test**, for example, full blood count, blood group testing, rubella (German measles) testing, Hepatitis B screening, etc. These are performed using a needle placed into your arm to withdraw a small amount of blood.

- **Optional blood test at 16 weeks** to detect the risk of Down’s syndrome and Spina Bifida. (This test will be replaced by Nuchal Translucency, a combined scan and blood test, at 11 to 13 weeks during 2009).
Scan
An ultra sound scan will give you, the midwife and doctor, information about your baby’s growth and development. Please note that it is not NHS Grampian policy to determine the sex of your baby.

• Early in pregnancy, a dating ultra sound scan is performed around 12 weeks of pregnancy to give you an estimate date of when your baby is due to be born.
• At 20 to 22 weeks of pregnancy, a detailed ultra sound scan is done to check the baby’s development.

Antenatal classes
Your midwife will tell you about antenatal classes available in a variety of locations. The classes will give you information about labour, birth, baby care and becoming a parent, and are offered to both mums and dads.

A tour of the labour ward or maternity unit can be arranged. A virtual tour of Dr Gray’s is also available.
Physical activity while pregnant
Every pregnant woman should try to fit exercise into her daily routine, unless you have been advised by your midwife or doctor not to exercise for a particular reason. Keeping fit and being healthy during your pregnancy is important for your well being and your baby. Being fit will help you cope with labour and get back into shape more quickly after the birth. One type of exercise called pelvic floor exercise helps strengthen the muscles of the pelvis which come under great strain in pregnancy and childbirth.

Please consult your Midwife or GP before starting any physical activity or exercise.
Giving birth

Where to give birth
Maternity services in Scotland are designed to give the best care available, which is safe and where appropriate, midwife led. Your midwife will provide advice and support and will be happy to discuss with you the options for birth (e.g. hospital, home and water birth, where facilities are available). If your pregnancy is uncomplicated or low-risk, you have the options of delivering your baby at:

- The Midwives Unit (within Aberdeen Maternity Hospital)
- Aberdeen Maternity Hospital
- Dr Gray’s Hospital
- Banff Midwives Unit (Chalmers Hospital)
- Fraserburgh Maternity Unit (Fraserburgh Hospital)
- Aboyne Maternity Unit (Aboyne Hospital)
- Peterhead Maternity Unit (Peterhead Community Hospital)
- Your own home

During labour and the birth of your baby, it is important that you feel supported by your husband or partner or companion, if you so decide. Some women prefer more than one companion and this can normally be accommodated.
Types of delivery
During your pregnancy, you will have the opportunity to discuss with your midwife and possibly with an Obstetrician, the type of delivery which would be best for you and your baby. Your choices are important and will be respected, wherever possible. However, depending on the progression of delivery, it might be necessary to take other steps essential for the health and well-being of the mum and baby.

- The majority of women have uncomplicated pregnancies which progress to a normal spontaneous delivery.
- Some women require help at the end of labour when forceps or Ventouse (suction) delivery might be the safest option.
- Caesarian Section delivery maybe required depending on the progress of your labour.
- Induced labour is sometimes required if the pregnancy has gone beyond 41 - 42 weeks or if you have a medical problem which is affecting the wellbeing of yourself or your unborn baby e.g. high blood pressure.
- Some women may need to have a planned Caesarean section for reasons that will be discussed with you by your consultant Obstetrician team.

Pain relief in labour
Your midwife will discuss with you what methods of pain relief are available in the location where you will have your baby. You will be encouraged to remain active throughout your labour and adopt whatever position seems right for you at different stages of your labour.
Pain relief in labour includes:
- Self help methods such as relaxation, massage and keeping active.
- TENS (Trans Electrical Nerve Stimulation) – a method which involves placing small rubber pads on your back to allow a gentle electric current to stimulate your nerve endings to produce endorphins, these are natural pain reducing hormones.
- Water, use of a deep bath or birthing pool.
- Pain relieving drugs: Equanox® or Entonox® (gas and air), Diamorphine or Epidural. Please note Epidural is only available in Aberdeen Maternity Hospital. A type of Epidural called a Spinal is used for Caesarean deliveries and this is available both in Aberdeen Maternity and Dr Gray’s Hospitals.

Postnatal care for Mother and Baby

Immediately after the birth of your baby
If all is straightforward, you or your partner will usually be offered the opportunity to cut the baby’s cord. The midwife will also encourage you to have skin-to-skin contact with your baby and to offer a first breast-feed, if appropriate.

Mum’s care after giving birth
The time after the baby is born is a special time for you to explore your baby, to try to feed him or her and to generally recover from your labour and birth. When you are ready, you will be encouraged to have a bath or shower.

If you give birth in hospital and all is well, you will be able to return home on the same day (within 2 to 6 hours) or within three days of
giving birth. Your care will be carried out by your midwife team. If there is a clinical need for you or your baby, you will stay in hospital until you are fit to return home.

**Baby’s care after birth**

This will include:

- Full physical examination and regular checks of your baby.
- Shortly after the birth of your baby, an injection of Vitamin K will be offered to your baby. This is to prevent a serious but rare condition in newborn babies called haemorrhagic disease.
- In the first few days following delivery, your baby will be given a Hearing Screening test.
- If your baby requires a TB vaccination, this will be arranged.

A midwife will continue to care for you over the next 10 days or longer after giving birth, as required. The midwife will assess how well you and your baby are doing. When you and the midwife decide the time is right, the midwife will hand your care over to the health visitor. The health visitor will initially see you at home and thereafter at the baby clinic at your GP Practice. The health visitor will monitor your baby’s growth and development and is available for all infant health related questions.
Support for feeding your baby
You will soon begin to gain confidence in looking after and feeding your baby.

NHS Grampian supports the right of all parents to make informed choices about infant feeding. Whatever method of feeding you choose; your midwife or health visitor will support you in your decision and can explain how to do it. Breastfeeding is the healthiest way to feed your baby and we recognise the important benefits which breastfeeding provides for both you and your child. NHS Grampian therefore encourage you to breastfeed your baby.

Registering a birth
In Scotland, you must register the baby’s birth within 3 weeks at a Registrar’s Office. You will be given a leaflet regarding the registration of your baby’s birth by your midwife.

Once the birth has been registered, you must also register your baby with a GP. Most women choose to register their baby with the same GP Practice as themselves.

Immunisation
Immunisation is the safest and most effective way of protecting your baby against serious diseases. In the UK, it is recommended that you follow a complete routine immunisation programme. A health visitor will discuss this with you and answer any questions you may have.
Healthy Start

What is `Healthy Start`?
Healthy Start is a Department of Health Scheme designed to help low-income families living in the UK to eat healthily, by giving vouchers for free milk and fresh fruit and vegetables to pregnant women and families with children under the age of four.

What does it provide?
Qualifying families receive free vouchers in the post every four weeks which can be exchanged at shops displaying the `Healthy Start` sign, for:

- Liquid cow’s milk
- Infant formula milk
- Fresh fruit
- Fresh vegetables

In addition, Healthy Start entitles qualifying families to free vitamin supplements, which are supplied locally by Community Pharmacies. It is important to start taking vitamin supplements as soon as possible in your pregnancy as well as eating a healthy diet. Children should take a supplement until they are 5 years old.

How do I qualify?
The scheme is open to pregnant women and families with children under the age of four who are on:

- Income Support
- Income based Jobseeker’s Allowance
- Child Tax Credit (but not Working Tax credit up to a set income level)
In addition, all pregnant women under the age of 18 also qualify, whether or not they are on benefits.

Where can I get more information?
Your midwife, Health Visitor, District Nurse, Community Nurse or GP can help you to get the right forms to apply. There is also a telephone helpline on: 0845 6076823 and a website at: www.healthystart.nhs.uk

Ongoing help and support
Ongoing support and counselling are available for mothers. Please contact your Midwife, GP or Health Visitor.

Useful contacts
For any queries, advice regarding your pregnancy or changing appointments with your midwife, please contact her on the number she has given you.

Labour Birth Units and Hospitals
Aberdeen Maternity Hospital
Maternity Unit 01224 552777
Labour Ward 01224 553602
Antenatal Clinic (appointment) 01224 552072
Aboyne Hospital 01339 886433
Chalmers Hospital, Banff (Midwifery) 01261 819129
Dr Gray’s Hospital 01343 567220
Fraserburgh Hospital 01346 513151
Peterhead Community Hospital 01779 482437
Community Midwives Team

**Aberdeen City Community Midwives**
01224 552071

**Aberdeenshire Central Community Midwives**
Inverurie and Kemnay (Garroch)
Huntley
Insch and Rhynie
Alford and Strathdon
Ellon
01467 631086
01466 765024
01464 821532
01975 564284
01338 725566

**Aberdeenshire South Community Midwives**
Stonehaven and Portlethen
Inverbervie
01224 785404
01561 360903

**Moray Community Midwives**
Forres Area
Elgin, Lossiemouth Area
Speyside Area
Buckie, Keith and Cullen Area
01309 678867
01343 567714
01340 821604
01542 839054

**Other useful numbers:**
NHS Grampian Healthline
NHS 24
NHS Helpline
NHS Grampian Smoking Advice Service
NHS Pregnancy Smoking Helpline
Scottish Women’s Aid
National Domestic Abuse Helpline
0500 20 20 30
0845 24 24 24
0800 22 44 88
0500 600 332
0800 224 332
0131226 6606
0800 0271 234
Am I entitled to free NHS care?

European Economic Area (EEA) countries and countries with reciprocal agreements

All nationals of the European Economic Area (EEA) countries (and Switzerland) and those countries with reciprocal agreements, are eligible to receive free NHS health care, the “treatment the need for which arose during the visit”. The list of EEA countries and those countries with reciprocal agreements are shown below.

For EEA nationals, the entitlement to free NHS health care is certified by the European Health Insurance Card.

The EEA countries are:
Austria   Liechtenstein
Belgium   Lithuania
Bulgaria   Luxembourg
Cyprus     Malta
Czech Republic   Netherlands
Denmark    Norway
Estonia    Poland
Finland    Portugal
France     Romania
Germany    Slovakia Republic
Greece     Slovenia
Hungary    Spain
Iceland    Sweden
Ireland    Switzerland*
Italy      United Kingdom
Latvia

Key:
*Not part of EEA but included in health care provisions.
Countries with reciprocal Health Care Agreements
The undernoted non-EEA countries have reciprocal agreements with the EEA countries. Their nationals are entitled to receive free NHS health care for “treatment the need for which arose during the visit”.

Anguilla  Malta
Australia  Monserrat
Barbados  New Zealand
British Virgin Islands  Russian Federation
Channel islands  St Helena
Falkland Islands  Former Soviet Union
Gibraltar  States
Isle of Man  Former Yugoslavia
Turks and Caicos Islands

Asylum Seekers
An asylum seeker is someone who has submitted an application for protection under the Geneva Convention and is waiting for that claim for asylum to be decided by the Home Office.

As an asylum seeker, you are entitled to the same free NHS health care as the indigenous population. You should produce your HC2 certificate when you go to register with a GP. HC2 certificates are issued on behalf of the Department of Health. They are issued to the main applicant but details of dependants are included on the certificate in order to enable the whole family to access free NHS services.

In addition, as an asylum seeker you may also have been issued with an Applicant Registration Card (ARC card), for identification purposes. Again, if you have an ARC card, this
Refugees
A refugee is someone who:

“has a well founded fear of persecution for reasons of race, religion, nationality, membership of a particular social group, or political opinion; Is outside the country they belong to or normally reside in;

and

is unable or unwilling to return home for fear of persecution.”

As a refugee, you are entitled to the same free NHS health care as the indigenous population. You should produce your HC2 certificate when you go to register with a GP. HC2 certificates are issued on behalf of the Department of health. They are issued to the main applicant but details of dependants are included on the certificate in order to enable the whole family to access NHS services.

In addition, as a refugee you may also have been issued with an Applicant Registration Card (ARC card), for identification purposes. Again, if you have an ARC card, this should be taken with you when you go to register with a GP. The ARC card is proof that you have lodged an application for asylum in Britain.

Immunisation
Immunisation is the safest and most effective way of protecting your baby against serious
diseases. In the UK, it is recommended that you follow a complete routine immunisation programme. A health visitor will discuss this with you and answer any questions you may have.

As a refugee, you are entitled to the same free NHS health care as the indigenous population. You should produce your HC2 certificate when you go to register with a GP. HC2 certificates are issued on behalf of the Department of health. They are issued to the main applicant but details of dependants are included on the certificate in order to enable the whole family to access NHS services.

In addition, as a refugee you may also have been issued with an Applicant Registration Card (ARC card), for identification purposes. Again, if you have an ARC card, this should be taken with you when you go to register with a GP. The ARC card is proof that you have lodged an application for asylum in Britain.

**Work permit holders**
Many non-EEA nationals and nationals from countries that do not have EEA reciprocal agreements, enter the UK on a work permit each year. If you hold a work permit which is for less than 6 months duration, neither you nor your family here as dependents have any entitlement to free health care.

If you hold a work permit which is for more than 6 months duration, you and your family here as dependents are entitled to free NHS health care.
After 12 months of working in the UK, a work permit holder can apply for an EEA Residents Permit. If as a work permit holder you have spent five continuous years in the UK, you would usually become eligible for “Indefinite Leave to Remain”. Holders of an EEA Residents Permit and those with “Indefinite Leave to Remain” are entitled to free NHS health care.

**Examples of exceptions and special cases**

There are many exceptions to the regulations governing free access to NHS health care. Here are a few examples of the main exceptions and special cases, which allow anyone, regardless of status, to have free access to NHS health care services. This list is not exhaustive, almost every rule or guidance on this topic is extremely long and full of further exemptions and special cases. If you require more information, please ask the GP receptionist, practice manager or contact Nigel Firth, Equality and Diversity NHS Grampian on (01224) 552245 or by email: Nigel.firth@nhs.net

**Temporary residents from non-EEA countries and countries that do not have reciprocal health care agreements**

A temporary resident is someone who has been in an area served by a GP Practice, for more than 24 hours, but less than 3 months. A GP has the discretion, if they wish, to register a non-EEA national or a national from a country that does not have EEA reciprocal agreements, as a temporary resident with their practice and thereby provide free primary health care services to them and their family, regardless of their status.
If a temporary resident has been in the UK for more than 3 months, a GP has the discretion, if they wish, to register a non-EEA national or a national from a country that does not have EEA reciprocal agreements, with their practice and thereby provide free primary care services to them and their family, regardless of their status.

It should be noted that other NHS services such as hospital care, might not necessarily be free to temporary residents from countries outwith the EEA and countries that do not have reciprocal health care agreements with the EEA.

**Other main exceptions and special case exemptions are:**

- Emergency treatment in an A&E department or provided by a general practitioner.
- Family Planning Services.
- Treatment for certain infectious diseases, (including sexually transmitted diseases).
- Involuntary psychiatric treatment.
- HIV/AIDS.
- Treatment provided as a result of a Court Order.
- Anyone who has been in the UK legally and lawfully for more than one year.
- If the primary purpose of being in the UK is for employment and they are currently employed.
- A student who is pursuing a full time course of study, their dependents are also exempt from charges.
- Accredited diplomatic staff.
- Off shore employees working in UK territorial waters, or in the UK sector of the
North Sea.
• Crew members employed on UK registered vessels.

**Au Pairs**
In terms of NHS regulations, au pairs are defined as:

“…persons who come to the UK to learn the English language and to live for up to 2 years as a member of an English speaking family. Au pairs are unmarried, aged between 17 and 27, without any dependents in terms of these arrangements…”

If an au pair comes from an EEA country or a country with a reciprocal health care agreement, they enjoy the same rights to free NHS health care as any other national of that country.

If an au pair comes from a non-EEA country or a country that does not have a reciprocal agreement, they have no entitlement to free NHS health care, until they have been resident in the UK for one year.
What if I have no proof of entitlement to free NHS health care?
If you cannot prove your entitlement to free NHS health care for non-emergency treatment, then you cannot receive free NHS non-emergency treatment.

In this situation, you can either:
- ask a GP to consider accepting you and your family as temporary residents, as described at the Examples of exceptions and special cases section
- or
- ask a GP to accept you and your family as private patients.

If the GP accepts you and your family as private patients, you will be required to pay for any treatment received. The GP will also give you an estimate of cost before each treatment commences. The standard of care you will receive will be exactly the same standard as that provide to NHS patients.

If the GP refers you or your family for further treatment, this will also be chargeable.

What if I need emergency health care?
Everyone has an entitlement to free emergency health care, whether this is provided at an Accident and Emergency department or by a GP, regardless of their status.

If you or your family have a serious accident or a medical emergency, contact the ambulance service by dialing 999.

*If you do not speak English, ask an English speaking friend or relative to telephone on your behalf.*
Will I be able to communicate with the doctors and nurses if I speak little or no English?

All GP Practices, Hospitals and Community staff in Grampian are equipped with the “Language Line” telephone interpretation service. “Language Line” gives access to expert interpreters on the telephone, for 120 different languages, in 60 to 90 seconds. If you are non-English speaking or if your English is not very good, you will still be able to communicate easily with your doctor or nurse. If you prefer, you can use “Language Line” to inform your doctor or nurse that you would prefer the presence of a “face to face” interpreter, if possible, for future appointments.

Do you have difficulty in understanding the English language?

If you have a problem reading or understanding the English language, this document is available in a language of your choice. Please ask an English speaking friend or relative to phone, write or email Corporate Communications.

The details are:

Corporate Communications,
Ashgrove House,
Aberdeen Royal Infirmary,
Aberdeen AB25 2ZA
Telephone: (01224) 551116 or 552245
Email: Grampian@nhs.net

Do you have a visual impairment?

This document is also available in large print, as a CD and in other formats, upon request.

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