



West Middlesex University Hospital



Chelsea and Westminster Hospital  
NHS Foundation Trust

Chelsea and Westminster Hospital  
and West Middlesex Hospital  
Maternity Services

369 Fulham Road  
London  
SW10 9NH

Tel: 020 3315 8000

[www.chelwest.nhs.uk](http://www.chelwest.nhs.uk)

To all women booked for maternity care,

2<sup>nd</sup> April 2020

## COVID-19: UPDATED MATERNITY ADVICE FOR CHELSEA AND WESTMINSTER HOSPITAL NHS FOUNDATION TRUST (WEST MIDDLESEX AND CHELSEA SITES)

Thank you for using the maternity services of Chelsea & Westminster and West Middlesex Hospitals. We would like to update you on a few changes that we have made to our Maternity Service in response to the Covid-19 outbreak.



You can also receive regular updates by following the social media sites of our Maternity Voices Partnership, or contact them with your feedback:

### Chelsea and Westminster

Email: [ChelWest.MVP@gmail.com](mailto:ChelWest.MVP@gmail.com)



@Chelsea\_&\_Westminster\_Maternity\_Voices



@ChelWestMVP

### West Middlesex

Email: [WestMid.MVP@gmail.com](mailto:WestMid.MVP@gmail.com)



@West\_Middlesex\_Maternity\_Voices



@ChelWestMid\_MVP

## Key information



- **Covid-19 Symptoms:** If you, your partner or anyone living in your household have the following symptoms or have had these symptoms in the last 7 days, and/or has tested positive for Covid-19 in the last 14 days, please inform your named midwife and do not attend the hospital until you have spoken to a midwife or obstetrician via:



Chelsea Site: Maternity Assessment Suite **0203 315 6000 Option 1**  
West Middlesex Site: Triage **020 8321 5839**

- **A high temperature.** This means you feel hot to touch on your chest or back. If you have a thermometer, a high temperature is anything at 37.8C or above.
- **A new, continuous cough.** Coughing for more than an hour, or 3 or more coughing episodes in 24 hours.

**Call 999 if you are having difficulty breathing or your symptoms are life threatening.**

## Summary of Changes

**Birth partners and visiting:** During social distancing recommendations from the Government, we have made the difficult decision to limit birth partners to one nominated person during labour and birth. This person cannot swap with any other and should be well and not recently exposed to Covid-19. They should bring with them everything they need e.g. food, drink, toothbrush, so that they can remain in the room with you. No visitors or partners are currently able to be present for any inpatient ward stays, triage assessments (unless at the beginning of labour) or ultrasound scans.

**Antenatal care:** A small number of your routine antenatal appointments will now be conducted virtually. Antenatal group education workshops will be replaced by a series of online videos that will be available soon.

**Place of birth:** We intend to keep all our birth settings available (labour ward, birth centre, home birth and water birth). If you have planned to give birth at home or would like to explore this option, please talk to your antenatal midwife.

**Planned induction of labour, suture insertion/removal, Caesarean birth and turning breech babies:** Planned procedures in maternity will continue as normal. However, if you or someone you live with has symptoms of Covid-19, we will try to delay your induction or caesarean birth until after the infectious period, where clinically possible. This will also apply if you or your partner has Covid-19 after a full clinical assessment of your individual needs.

**Postnatal:** Where clinically appropriate, women will be encouraged to return home as soon as possible after birth. This is to comply with the social distancing guidelines, and to help protect yourselves, other women in hospital and the healthcare professionals caring for you. In doing so we aim to maintain our high standards of care.

**Frequently asked questions:** There are several FAQs and answers at the end of this letter.

## Detailed Information

### *Antenatal – pregnancy care*

❖ **Changes to Visiting.** We understand how important support from partners, family and friends is during pregnancy and birth. In order to protect you and our staff, we have taken the difficult to decision to limit visiting during the current social distancing measures. For appointments including scans, stays on the antenatal ward, and triage assessments, no visitor or support person can be present. We encourage and welcome their virtual presence by phone/tablet.

Please be reassured that all the staff who will be looking after you baby while your birth partner is not present will work hard to help you relax and get the most from your appointments.

❖ **Contacting you:** Some of our calls may be from a withheld number, it is important you answer.

❖ **Antenatal care.** Your routine antenatal visits will now be a mixture of face to face and virtual appointments. Below is a list of the current (updated) schedule of visits, although your appointments may vary if needed for your individual care. Sometimes we may need to change your appointment at short notice, so please look out for calls from your midwife (this may come up as a private number).

In addition, face to face antenatal group education has now been replaced by a new set of online videos to be available soon.



**Booking Appointment:** Your first meeting with a midwife will be over the phone or by virtual appointment, which usually takes an hour. The midwife will take your previous medical and obstetric history (please have any relevant documents with you) and ask you questions about your lifestyle. They will discuss the blood tests recommended for your next appointment, and

will also agree a plan for your care.

**Dating scan:** This ultrasound scan will take place between 11 weeks and 5 days and 12 weeks and 3 days. You will also meet one of our midwives or maternity support workers who will check your blood pressure and urine and will offer you some blood tests (explained during your booking appointment). You will also receive your handheld maternity record. It is important you carry your notes with you at all times and bring them with you to every appointment.



**16-week appointment:** This will be a telephone consultation. After this appointment your midwife will post you a growth chart to help us monitor your baby's growth. Please add this into your maternity notes.

**19-week ultrasound scan:** At this visit a midwife or maternity support worker will check your blood pressure and urine.



**28-week appointment:** you will either see a midwife or obstetrician, depending on your individualised care plan, and they will check your blood pressure and urine, listen to your baby's heart rate, and check the position of your baby. This will take place in the antenatal clinic, community clinic or your home depending on your midwifery team and whether you are seeing an obstetrician. You can also collect your MATB1 form (please inform your midwife if you need your MATB1 form before 28 weeks).



**32-week appointment:** you will be seen by your midwife who will check your blood pressure and urine, listen to your baby's heart rate, and check the position of your baby. This will take place in the antenatal clinic, community clinic or your home depending on your midwifery team.

**36-week appointment:** you will be seen by your midwife who will check your blood pressure and urine, listen to your baby's heart rate, and check the position of your baby. Your midwife will also discuss your birth preferences with you. This will take place in the antenatal clinic, community clinic or your home depending on your midwifery team.



Please explore the Mum & Baby app which has useful information and templates to help you identify your birth preferences.



All **remaining appointments** are the same as the antenatal schedule in your maternity notes (page 33). If you find it difficult to make a GP appointment at 38 weeks please let your midwife know.

**If you experience any of the following please call us:**



Chelsea Site: Maternity Assessment Suite **0203 315 6000 Option 1**  
West Middlesex Site: Triage **020 8321 5839**



- Vaginal bleeding
- Your baby is not moving, or the movements are not the usual pattern
- Starred vision or disturbed vision
- Swelling of your face, hands or feet
- Leg pain, swelling and/or redness
- If your waters break or you are concerned about vaginal discharge
- If you have pain when passing urine
- Constant tummy pain
- Persistent headache not improved/cleared with paracetamol
- Epigastric pain not resolved with antacids
- Itching of your hands or feet
- If you feel short of breath
- If you feel unwell and are unable to maintain fluid intake or become feverish

## Labour and birth



❖ **Place of birth.** We are committed to supporting choice and intend to keep all birth settings available (labour ward, birth centre, home birth and water birth) throughout this outbreak. To do this, we are working hard to make sure we have enough staff in all areas, and we have acquired additional resources to support transfers of women in urgent situations. If you have planned or would like to plan to give birth at home in the next few months, talk to your midwife who will ensure you have the most up to date information.



**For any women experiencing signs or symptoms of Covid-19 or diagnosed with Covid-19, the recommendation is to attend the hospital when in established labour as additional monitoring will be recommended to maintain the safety of you and your baby.**



❖ **Birth partners.** We understand how important support from partners, family and friends is during birth. In order to protect you and our staff, we ask that only one birth partner be present during labour and birth. This person cannot change, and should be well and not recently exposed to Covid-19, and they can be present once you are admitted to the labour ward or birth centre. They can also currently be with you in theatre. They will need to leave about 3 hours after the baby is born as they cannot accompany you to the postnatal ward. For antenatal ward stays and the start of induction, no birth partner can be present, but we encourage and support their virtual presence by phone/tablet. Please be reassured that all the staff who will be looking after you and your baby while your birth partner is not present will work hard to help you relax.

❖ **When labour starts.** If your contractions start, your waters break, or you have any other concerns please call and speak to one of our midwives, who will be able to advise you:



Chelsea Site: Maternity Assessment Suite **0203 315 6000 Option 1**  
West Middlesex Site: Triage **020 8321 5839**

We recommend, if it is safe to do so and following advice from one of our staff, that you remain at home in early labour. You should keep hydrated, try different positions, and check you are passing urine regularly. In the early stages you may also find paracetamol 1g (2 tablets) is helpful, and these can be taken 4-6 hourly but *no more than 8 tablets in 24 hours*. You can call back regularly eg every 4 hours for further advice and to keep us updated.

❖ **Planned induction of labour or caesarean birth.** Our planned inductions and caesarean births will continue as normal. There may be some changes to the pathway, but your midwife or obstetrician will discuss this with you. If you or someone who lives with you has symptoms of Covid-19, we will try where clinically possible to delay your induction or caesarean birth until after the infectious period. For the start of induction, no birth partner can be present, but we encourage and support their virtual presence by phone/tablet. Your birth partner can be with you when are ready to go to the labour ward or birth centre, and also in theatre.

## Postnatal – care after birth

❖ **Changes to Visiting.** We understand how important support from partners, family and friends is once your baby has been born. In order to protect you and our staff, we have taken the difficult to decision to limit visiting during the current social distancing measures. Currently your birth partner will be asked to leave about 3 hours after your baby is born, and no partner or supporter can visit or stay on the postnatal ward. We encourage and support their virtual presence by phone/tablet. Please be reassured that all the staff who will be looking after you and your baby while your birth partner is not present will work hard to help you relax.

❖ **Discharge.** Once you have had your baby, where clinically appropriate you will be encouraged to return home as soon as possible.

❖ **Postnatal visits.** Once you are discharged, we will ensure that you receive the very best postnatal care at home. The way that we provide this has changed, to ensure we are maintaining a safe service for all while ensuring the safety of our staff.

While this will vary with individual circumstances, the minimum consultation plan will include:



**Day 1 (your first day home).** You will receive a telephone consultation.



**Day 5.** Either a midwife or a Midwifery Support Worker (MSW) will come to your home. At this appointment we will weigh your baby and perform the Newborn blood spot test.

**Day 10.** We will visit you again on day 10.

**If you experience any of the following in the days after your birth please call us:**



Chelsea Site: Maternity Assessment Suite **0203 315 6000 Option 1**  
West Middlesex Site: Triage **020 8321 5839**



- If your bleeding is becoming heavier or you are passing clots
- You are concerned that your wound site is becoming infected (red, inflamed, painful, swelling, oozing)
- Your vaginal discharge is offensive, or your stitches become more painful
- You are concerned about your baby feeding or your baby is sleepy and not waking for feeds
- You feel unwell and/or feverish
- You have pain or swelling in your legs or feel short of breath
- If you have any other concerns

## Thank you

We know that pregnancy can be a stressful time for you and your loved ones. But it should also be a wonderful experience. Please be reassured that you will receive the very best care and our team of dedicated doctors, midwives and support workers will be with you every step of the way.

Thank you for your understanding, and in the meantime, please stay safe, keep washing your hands and maintain social distancing.

Yours faithfully,

Victoria Cochrane  
Director of Midwifery & Gynaecology

## Frequently Asked Questions

❖ **What other resources are available for information?** The Royal College of Obstetricians and Gynecologists in conjunction with the Royal College of Midwives have created a webpage with useful information for you and your family. This page is frequently updated as new guidance and information is available:

[Coronavirus infection and pregnancy. Information for women and their families](#)

We will be updating the Maternity Webpage on the Hospital Site as information and guidance changes. You can also find useful resources on the Mum and Baby App.

More general information is available from NHS England:

<https://www.gov.uk/government/collections/coronavirus-covid-19-list-of-guidance#guidance-for-the-public>

This is also available in many different languages:

<https://www.doctorsoftheworld.org.uk/coronavirus-information/>

❖ **Who should I contact?** For non-urgent issues please contact your named midwife. If you have an urgent query, please contact:



**Chelsea site: Maternity Assessment Suite 020 3315 6000 Option 1**  
**West Middlesex Site: Triage 020 8321 5839**

❖ **Is there any online support for a new mum?** There is a free app for all pregnant women and for those who have just had a baby called '**MUM & BABY**' which you can download from the app store or google play store. This has a lot of information about all aspects of pregnancy and the first few weeks of caring for yourself and your new-born baby. You can also use it to start putting together birth preferences and a plan for your care after birth.



❖ **Should I be social distancing?** We recommend that you follow government advice on social distancing.

[Guidance on social distancing for everyone in the UK.](#)

❖ **Is the hospital safe and clean?** All our healthcare and support staff are working tirelessly to ensure the hospital is kept clean and the risk of transmitting Covid-19 is minimized. We all need to play our part in ensuring we report symptoms and perform hand hygiene regularly.

The senior midwifery and medical team are constantly reviewing how many staff are available and how busy we are across the whole maternity service. We have contingency measures in place should staff sickness increase to ensure the safety and quality of our care is not affected.

❖ **Can I still attend the hospital if I have any concerns?**

**If your concern is life threatening, then please call 999.**

Otherwise you should call the Maternity Assessment Suite (Chelsea site: 020 3315 6000 option 1) or Triage (West Middlesex site: 020 8321 5839) and a midwife will assess your concern and advise you. Please be assured that you will be seen if it is clinically indicated.

❖ **Will I be seen and booked as normal?** Your booking appointment will be either by phone or a virtual appointment, which usually takes about an hour. The midwife will take a detailed history of any previous pregnancies and births and your medical history. If possible please have details of any medical conditions and/or previous birth/pregnancies if not at our hospitals. It is important you provide as much information as possible as this will help plan your ongoing care.

As the midwife will be unable to check your blood pressure or take your routine blood tests this will happen at your dating scan.

❖ **Can I have a birth partner?** Yes, 1 birth partner (with no symptoms of or exposure to Covid-19) can be with you during labour and birth. This must be the same person and they will be asked to leave when you transfer from the birth area to the postnatal area.

❖ **My birth partner has been unwell and is suspected to have Coronavirus: can they still come to the hospital?** If your birth partner no longer has symptoms, they can attend the hospital. It is really important that you inform us via the Maternity Assessment Suite (Chelsea site: 020 3315 6000 option 1) or Triage (West Middlesex site: 020 8321 5839) prior to coming into hospital. This allows staff to prepare for your arrival and ensure we minimise the possible transmission of the virus. It is really important that you are honest about your own and your birth partner's symptoms.

❖ **My planned birth partner is symptomatic and is unable to come to the hospital can I bring someone else?** Yes, if that person lives in the same household with you, but it is important that you inform us before coming to hospital that someone in your household has symptoms of Covid-19. If your alternative birth partner lives in another household it is important they understand that they must self-isolate for 14 days after coming in to hospital with you.

❖ **Can partners join me for my scans?** All scans and appointments should be unaccompanied. However, there are some circumstances when a partner/ companion may be permitted, please speak to your midwife if you have any concerns.

❖ **Are homebirths being supported?** Our homebirth service is running, and we are committed to keeping it running throughout this outbreak as long as we have enough staff to do this safely (we would update the website if there were any changes). We encourage women to discuss the option of home birth with their midwife.

❖ **What changes have been made to the induction of labour process?** Depending on the reason why you are being induced we may recommend you have an outpatient induction with a cervical ripening balloon. This is to minimise your time in hospital and it allows you go home to be with your birth partner in the early stages of the induction process. Your midwife or obstetrician will discuss the recommendations with you.