



# “My Maternity Journey”

## A Personal Care Plan

My choices for the care of me and my family



Nottingham and Nottinghamshire  
**Maternity Voices**  
Working in partnership to improve maternity services



**NHS**  
**Better Births**  
Nottingham and Nottinghamshire

## How to get the most out of your “My Maternity Journey”

We know how difficult it can be to keep stating your needs and choices over and over again and to keep track of the decisions you have made.

“My Maternity Journey” is a starting point to summarise what matters to you and your family and how you would like to be supported throughout your maternity care.

You will have a number of plans that relate to you, and your “My Maternity Journey” will be at the centre of them all. Your “My Maternity Journey” should not include the amount of detail that is in these other plans (such as condition-specific care and treatment plans). Instead, it is the starting point in getting to know you and understanding what is important to you and your family.

Your “My Maternity Journey” belongs to you and you can choose to share it with who you wish. It can be used to record:

- What is important to you and your family. This may include anything, but is likely to include your values and expectations about being pregnant, giving birth and becoming a mother.
- Your home/family/professional life and support networks.
- Any fears or concerns you might have

You can then use it to set out the decisions you make about the care and support you want to receive, taking into account the information above, and including any mental healthcare you might need. It should reflect your decisions about location of care, particularly where you want to give birth, your wishes for your labour and your wishes should a (further) complication arise.

## How do I make sure I get the most out of my “My Maternity Journey”?

This is your personal summary of what is important to you and your care and support. You keep it with you along with any other records so you can share it with who you feel needs to see it. It is important to take it to every appointment or meeting about your care.

As “My Maternity Journey” is your document, you can update or amend it whenever you feel it necessary. This ensures it remains up-to-date and accurately represents what matters to you. There is no need to complete all sections at once but it might be useful to, for example, think about what you might need after your baby is born, while you are still pregnant, so plans can be put in place.

## How others can support me to get the most out of “My Maternity Journey”?

As you will bring your “My Maternity Journey” to all of your appointments everyone who offers you care and support can know what is important to you and how you want to be supported.

## How do I complete “My Maternity Journey”?

“My Maternity Journey” is for you to complete as you are the expert of your life. You can do this alone or with the support of someone you trust, this may be a family member, friend, professional, or voluntary organisation. It is important that you have time to think about what you want to include and complete it at your own pace. For now you can complete it by handwriting but you will be able to update it electronically in the future.

### **Things you may want to think about and considering sharing:**

- Who are the most important people in your life?
- Who knows you well?
- What support do people give you now?
- Who is your biggest supporter now?
- Do you see family/friends? How do you spend your time with them?
- Who else supports you? e.g. Health, Social Care, Voluntary Services, other
- What do you feel you would like support to achieve during your maternity journey? What support from additional services might you need?
- What commitments do you have that may impact upon your care? e.g. other children, carer for other relatives, work or employment?
- Will any past experiences impact upon your maternity care?
- What makes you stressed, unhappy or upset and what can people do to help with this?
- What do you do to stay as healthy as possible?
- What hinders you from staying as healthy as possible?
- What support from additional services might you need? (stop smoking, housing, weight management)

- What are the best and worst times for you to attend appointments?
- If you need information, how would you like it presented to you?
- How can you be supported to understand the information given to you?
- If English is not your first language, will you need an interpreter? Will you need an interpreter for every appointment?
- What will improve your experience of maternity care?
- Do you feel there is anything missing?

## About me

**My Name is:** .....

**I like to be called:** .....

**My Named midwife is:** .....

**My team's name is:** .....

**What is important to me?**

**What is important to my family?**

**What you need to know to support me:**

**I would like:** (Please tick)

Stop smoking support ☐

Weight management ☐

Mental health condition ☐

**My access to transport is:**

**The people who support me are:**

**What I would like you to know about me, my values, hopes and beliefs:**

(This might include religious customs and beliefs, previous experiences you would like us to be aware of)

## My pregnancy

(Please use this space to write down choices that you make about your pregnancy.)

**I am taking:** (Please tick)

Folic acid ☐

Vitamin D ☐

Other medications:

\_\_\_\_\_

\_\_\_\_\_

I know what foods to avoid eating during pregnancy ☐

I am aware of recommendations about healthy lifestyle choices during pregnancy including healthy diet and appropriate exercise ☐

I understand the risks associated with smoking, drinking alcohol and the use of street drugs in pregnancy ☐

I would like support in some/all of these areas ☐

I am aware of how to access specialist mental health support if I need it whilst pregnant ☐

I am aware of the importance of understanding my baby's normal pattern of movement and action to take if I am worried ☐

I am building strong bonds with baby by talking, singing to my baby, massaging my bump and thinking about my baby ☐

I have had my recommended Flu and whooping cough vaccinations ☐

**Your health visitor will arrange to meet with you around 28-32 weeks of pregnancy. She will be interested in how your pregnancy is progressing and will be able to offer information about what to expect when your baby arrives.**

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**I am worried/concerned about:**

**My partner is concerned about:**

**Are you or your family concerned about your mood?**

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**I discussed my pregnancy plan with my midwife/doctor at:**

16wks ☐ 25wks ☐ 28wks ☐ 31wks ☐ 34wks ☐

36wks ☐ 38wks ☐ 40wks ☐ 41wks ☐

## My birth

(Please use this space to write down preferences or choices that you make about your birth).

**If things don't go to plan I would like...**



**I am aware of the 3 birth settings available to me within Nottinghamshire and I would prefer to give birth:**

- at home ☐
- at a midwife-led unit ☐
- with midwife-led care within a Maternity unit ☐
- in a Maternity unit (obstetric unit/labour ward) ☐
- I am not sure and would like to find out more ☐

**My birth partner(s) will be:**

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**During labour and birth I would consider the following coping strategies:**

- self-hypnosis/hypnobirthing ☐
- aromatherapy/massage ☐
- water (bath/birthing pool) ☐
- TENS machine ☐

**I am worried/concerned about:**

**My partner is concerned about:**

**Are you or your family concerned about your mood?**

**I discussed my birth plan with my midwife/doctor at:**

- 16wks ☐ 25wks ☐ 28wks ☐ 31wks ☐ 34wks ☐
- 36wks ☐ 38wks ☐ 40wks ☐ 41wks ☐

- Entonox ☐
- Medication for pain relief ☐
- Epidural ☐
- Vaginal examinations ☐
- I am not sure and would like more information ☐

**After the birth of my baby I would like to expel my placenta:**

- naturally (physiological 3<sup>rd</sup> stage) ☐
- active 3<sup>rd</sup> stage (midwife assists after giving hormone injection) ☐

**I understand why skin-to-skin contact with my baby is important and would like:**

- immediate skin-to-skin contact ☐
- to wait and see how I feel ☐

**I understand why vitamin K is recommended and would like my baby:**

- to have oral drops ☐
- to have an injection ☐
- not to be given Vitamin K ☐

## My baby and me

(Please use this space to write down choices that you make about you and your baby's care after birth.)

**I am aware that I will be given support to feed my baby, my thoughts about feeding are:**

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I am aware of responsive feeding and the signs that baby might be ready to feed ☐

**I have prepared a safe place at home for baby to sleep and know that baby must:**

sleep in a cot/crib or Moses basket in my room for the first 6 months ☐

sleep on his or her back with feet to the foot of the cot/crib or Moses basket ☐

have a thin sheet and blankets which can be tucked in securely ☐

**I have discussed:**

the importance of hand hygiene ☐

caring for my body and any surgical wounds after birth ☐

signs of infection and what to do if I am concerned/unwell ☐

pelvic floor exercise and physio if needed ☐

recovery following caesarean ☐

### **I have discussed:**

- newborn jaundice and what action I should take if I am concerned ☐
- newborn blood spot screening test ☐
- umbilical cord care ☐
- how to bath my baby ☐

### **After birth I will need to:**

- register my baby's birth ☐
- register my baby with my GP ☐
- Make an appointment for me and my baby 6-8 weeks after birth ☐

**The Health Visitor and other members of the Public Health Nursing Service will be there to offer you support in the early weeks and as your baby grows.**

**You will be invited to access healthy baby reviews to ensure your baby's development is on track to give him/her the best start in life.**

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

### **Feelings that you and your family should look out for:**

- Persistent sadness/low mood
- Lack of energy/feeling overly tired
- Feeling unable to care for my baby
- Problems concentrating/making decisions
- Changes in appetite
- Feeling of guilt, hopelessness, self blame
- Difficulty in bonding with my baby
- Problems sleeping/excessive energy
- Loss of interest in things I normally like
- Unpleasant thoughts which I can't control or keep coming back
- Suicidal feelings or thoughts of self harm
- Repeating actions or developing strict routines

### **I am worried/concerned about:**

**Are you or your family concerned about your mood?**

### **I discussed my postnatal care with my midwife/doctor at:**

28wks ☐    36wks ☐    40wks ☐    First home visit ☐    Day 5 ☐

## Birth reflections

(Please use this space to write any significant concerns you have about your pregnancy, labour, birth and immediately after birth- particularly if you think this might affect your long term physical or emotional health, or the health of your baby. Please share the concerns with your midwife or doctor.)

## My future plans

(Please use this space to write any decisions you make or support you will need after discharge from maternity services)

I know how to contact my Health Visitor ☐

I have discussed my options for contraception and family planning ☐

**I would like continued support with:**

stopping smoking ☐

weight management ☐

feeding support ☐

I would like more information about local parent support ☐

**Notes/questions to ask**

## Additional information:

NHS UK [www.nhs.uk/conditions/pregnancy-and-baby/](http://www.nhs.uk/conditions/pregnancy-and-baby/)

Sherwood Forest Hospitals Foundation Trust Leaflet library: [www.sfh-tr.nhs.uk/our-services/maternity/patient-information-leaflets/](http://www.sfh-tr.nhs.uk/our-services/maternity/patient-information-leaflets/)

Nottingham University Hospitals Trust Leaflet library: [www.nuh.nhs.uk/adult-leaflets?smbfolder=77](http://www.nuh.nhs.uk/adult-leaflets?smbfolder=77)

NHS Apps Library: [www.nhs.uk/apps-library/category/pregnancy-and-baby/](http://www.nhs.uk/apps-library/category/pregnancy-and-baby/)

### **Baby Buddy app:**

Download for Android here: [play.google.com/store/apps/details?id=uk.org.bestbeginnings.babybuddy&hl=en\\_GB](http://play.google.com/store/apps/details?id=uk.org.bestbeginnings.babybuddy&hl=en_GB)

Download for iOS here: [apps.apple.com/gb/app/baby-buddy-pregnancy-guide/id903080388](http://apps.apple.com/gb/app/baby-buddy-pregnancy-guide/id903080388)

### **Baby's movements:**

Tommy's & NHSE: [www.tommys.org/pregnancy/symptom-checker/baby-fetal-movements](http://www.tommys.org/pregnancy/symptom-checker/baby-fetal-movements) (available in 10 languages)

### **Caring for and feeding your baby:**

La Leche League (breast feeding): [www.laleche.org.uk](http://www.laleche.org.uk)

NHS UK: [www.nhs.uk/conditions/pregnancy-and-baby/](http://www.nhs.uk/conditions/pregnancy-and-baby/)

National Breastfeeding Helpline: [www.nationalbreastfeedinghelpline.org.uk](http://www.nationalbreastfeedinghelpline.org.uk)

NHS Information Service for Parents: [www.nhs.uk/start4life](http://www.nhs.uk/start4life) (sign up for emails which are translatable into 12 languages)

[www.unicef.org.uk/babyfriendly/baby-friendly-resources/](http://www.unicef.org.uk/babyfriendly/baby-friendly-resources/)

**Finances:**

Tax Credit Information: [www.hmrc.gov.uk/taxcredits/](http://www.hmrc.gov.uk/taxcredits/)

Working Families (Rights & Benefits): [www.workingfamilies.org.uk](http://www.workingfamilies.org.uk)

Stop smoking: [www.smokefreelifenottinghamshire.co.uk/](http://www.smokefreelifenottinghamshire.co.uk/)

**Mental Health:**

MIND – for better mental health: [www.mind.org.uk](http://www.mind.org.uk)

**Pregnancy conditions:**

NHS UK: [www.nhs.uk/conditions/pregnancy-and-baby/](http://www.nhs.uk/conditions/pregnancy-and-baby/)

National Domestic Violence Helpline:

[www.nationaldomesticviolencehelpline.org.uk](http://www.nationaldomesticviolencehelpline.org.uk)

**Pregnancy loss:**

Miscarriage Association: [www.miscarriageassociation.org.uk/](http://www.miscarriageassociation.org.uk/)

Stillbirth & Neonatal Death Charity (SANDS): [www.sands.org.uk/](http://www.sands.org.uk/)

Zephyrs: [www.zephyrsnottingham.org.uk/](http://www.zephyrsnottingham.org.uk/)

**Choices of birth setting, where to have your baby guidance:**

[www.which.co.uk/birth-choice](http://www.which.co.uk/birth-choice)

**National choice offer:**

[assets.nhs.uk/prod/documents/NHSE-your-choice-where-to-have-baby-first-baby-sept2018.pdf](http://assets.nhs.uk/prod/documents/NHSE-your-choice-where-to-have-baby-first-baby-sept2018.pdf)

[assets.nhs.uk/prod/documents/NHSE-your-choice-where-to-have-baby-baby-before-sept2018.pdf](http://assets.nhs.uk/prod/documents/NHSE-your-choice-where-to-have-baby-baby-before-sept2018.pdf)

**Contraception:**

[www.fpa.org.uk/sites/default/files/contraception-after-having-baby-your-guide.pdf](http://www.fpa.org.uk/sites/default/files/contraception-after-having-baby-your-guide.pdf)

## Personalised Care Plan “My Maternity Journey” evaluation questionnaire

(Please complete this form and hand in to your midwife at your last appointment or follow this link to an online survey:

[www.surveymonkey.co.uk/r/personalcareplansurvey](http://www.surveymonkey.co.uk/r/personalcareplansurvey)

Your feedback is very valuable and will help us to improve our services for women and families across Nottingham and Nottinghamshire.)

### **Did you complete this booklet?**

Yes ☐ No ☐

### **What did you like about this booklet?**

### **What didn't you like?**

### **What would you change?**

### **Do you feel this helped you make and document your choices and decisions?**

If you would like to discuss your thoughts on this or on any issue to do with maternity services in Nottingham and Nottinghamshire please contact the **Maternity Voices Partnership**:

**Becky Gray** [ncccg.nottslmns@nhs.net](mailto:ncccg.nottslmns@nhs.net) or  
**Katie Swinburn** [katie.swinburn@nhs.net](mailto:katie.swinburn@nhs.net)