



Welcome to Transitional Care

Your baby is going to be transferred to our Transitional Care Unit to stay with you as they get ready to transition home.

What is transitional care?

Keeping mothers and babies together is an important part of newborn care. Transitional care is for babies who slightly more than normal newborn care, which can be provided whilst staying with their mother, rather than going to the Neonatal Unit. It is sometimes referred to as “TC”.

Some of the benefits of transitional care for mother and baby include:

- Bonding
- More opportunity for skin-to-skin contact
- Baby led feeding and support with breastfeeding
- Building confidence in parenting

Where is the Transitional Care Unit?

Transitional Care is located on Maple Ward, which is on the first floor of the Princess of Wales Women’s Unit at Birmingham Heartlands Hospital.

Why will my baby be admitted to Transitional Care?

- Establishing oral feeds
- Treatment for jaundice or infection
- Your baby has been born at 34 – 35 weeks gestation
- Your baby is now getting ready for home following a period of care on the Neonatal Unit

Your baby may need to spend more than a few nights on Transitional Care with you before your baby is ready for home; usually we expect that your baby will require a stay of between 1 and 14 nights. If you have any queries regarding the length of your stay on Transitional Care, please speak to the staff who are caring for you.

There may also be instances where your baby needs to be transferred to the Neonatal Unit for ongoing care; if this happens, staff will support you.

What to expect when my baby is admitted to Transitional Care

On Transitional Care, you will be expected to care for your baby as you would at home, including feeding your baby and meeting your baby’s hygiene needs. The neonatal nursing staff will support you to do this.

Staff will take your baby’s observations throughout your stay and will support you to feed your baby and give your baby any medication they may require during their stay.

You may be cared for by a member of the neonatal nursing team, or by a member of the midwifery team, depending on your and your baby’s needs. If you have been discharged from hospital maternity care, you will be cared for on “E bay” by our neonatal nursing staff.

Information for Patients

If you have not yet been discharged from hospital maternity care, you will be cared for on “D bay”, where you will receive care from the midwifery staff, and your baby will receive care from both the midwifery and neonatal staff.

When you come to Transitional Care, you will need to bring:

- Clothes, toiletries and any sanitary products you may need for yourself
- Clothes and nappies for your baby
- If you have hired a breast pump from the Neonatal Unit during your baby’s stay, please bring this back to the unit prior to your transfer to Transitional Care; you will be provided with expressing facilities while you are staying with us on Transitional Care.

You will be provided with three meals per day, and a jug of water will be provided alongside tea and coffee, however you may also wish to bring your own pre-packaged snacks and drinks from home.

Please be aware that there are no facilities on Transitional Care to heat up your own food, so you cannot bring food from home to be reheated.

If you are discharged from midwifery care and being cared for in E bay:

Follow up visits:

The ward that has discharged you will send a midwife round to see you the next day, to check you are well, as if you were discharged into the community. If they have any concerns they will escalate to the doctors. If you need more appointments, they will arrange follow ups. If you are well, your next visit from a midwife will be when you are discharged with baby.

Drug rounds:

You will not receive medication on drug rounds if you are in E Bay; we will provide you with take home medication if required. If you take regular medication at home, please make sure you have it with you.

What do I do if I am unwell or have concerns:

If you have a problem; please discuss with the neonatal nurse caring for you in blossom and she will escalate to a member of Maple ward staff, and feedback actions.

Security

All babies will have identification bands which include your baby’s name, date of birth and hospital number. Your baby may also have an information card placed at the top of their cot. Access to Transitional Care is gained via an intercom system and the Maple Ward doors always remain locked.

Please ask your nurse or midwife to let you out should you need to leave the ward. When returning to the ward, please do not allow anyone to follow you in.

Visiting times on Transitional Care

Visiting times for Transitional Care are as follows:

- 11am – 8pm for your birthing partner
- 2pm – 4pm and 6pm – 8pm for other visitors
- Your older children can visit 6pm – 8pm

Information for Patients

Unfortunately, there are currently no facilities for birthing partners to stay with you. If you have any queries regarding this, please speak to the staff who are caring for you.

Getting ready for home

In order to go home, your baby will need to be:

- Having at least 8 feeds in a 24-hour period and tolerating these
- Gaining weight
- Maintaining their own temperature in a cot

Your baby may have a feeding tube inserted into their nostril to support with feeding; if your baby is completing approximately half of their feeds each day, and you have received the relevant training to feed your baby via nasogastric tube, you may be able to go home with a feeding tube.

Your baby will have a hearing test and a full examination by the doctors as part of the national screening programme.

You will need to register your baby's birth and register baby with your GP. Please confirm your GP details with nursing staff.

Your baby may require "follow-up" at home, from either our community midwives or our Neonatal Community Outreach Team (NCOT), or in an outpatient clinic with one of our neonatologists. You will be advised of this prior to your transition to home.

Neonatal Community Outreach Team (NCOT)

Your baby will require ongoing support from NCOT if they are likely to be going home with any of the following:

- Weight less than 1.8kg on discharge
- Gestational age less than 35 weeks
- Receiving home oxygen
- Requiring nasogastric tube feeds
- Receiving home phototherapy

NCOT will visit and provide support to you and your baby in your home. Please ask the staff who are caring for you for further information on NCOT.

Contact details

Should you require further information about Transitional Care, you can speak to the nurse or midwife that is caring for you. Alternatively, you can contact:

- 0121 424 3508 if your baby is receiving care on the Neonatal Unit
- 0121 424 3656 If you and your baby are staying on "E bay"
- 0121 424 3517 If you and your baby are staying on "D bay"

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email interpreting.service@uhb.nhs.uk