

COVID-19: REGIONAL PRINCIPLES FOR VISITING MATERNITY SERVICES IN NORTHERN IRELAND

All people visiting Health and Social Care Settings will be required to wear face coverings for the foreseeable future

Date of Publication: 30th June 2020

Date of Implementation 6th JULY 2020

1.0 INTRODUCTION

1.1 This guidance for visiting requirements in Maternity areas **MUST** be read alongside *COVID-19: Regional principles for visiting in care settings in Northern Ireland (Date of Publication: 30th June 2020)* **AND** the Grid at Appendix 1, which is aligned to the pandemic surge levels/R value based on the best scientific advice available at any given time.

2.0 BACKGROUND

2.1 Since the onset of the COVID-19 surge period, guidance on visiting to maternity hospital settings has been that a woman could be accompanied by one birthing partner and only during active labour and at birth.

2.2 However, evidence not only supports the presence of birth partners in labour and birth in improving outcomes for women and infants but also highlights that infant bonding and attachment with parents, increases in the first few days after birth and restricting visiting reduces the opportunity for bonding.

2.3 Also, there has been a significant public pressure regarding women being unaccompanied for antenatal ultrasound scans and induction of labour, as well as during the postnatal period.

2.4 Therefore, the Strategic Clinical Advisory Cell (SCAC) at the Department of Health undertook a review of the emerging global evidence relating to coronavirus infection and the impact of hospital visitors on disease

transmission, as well as the impact of reduced involvement of birth partners in hospital maternity care (see Appendix 4).

3.0 DEFINITIONS AND SCOPE

3.1 This paper outlines guidance for pregnant women attending hospital settings for specific pre-planned antenatal appointments.

3.2 The guidance outlines situations where the woman can be accompanied by her partner or nominated other.

3.3 The revised guidance is applicable to women either, while they are an inpatient on antenatal or postnatal wards, or when attending the maternity hospital for the following reasons:

- 12-week pregnancy dating scan;
- early pregnancy clinic;
- anomaly scan;
- attendance at Fetal Medicine Department; and
- duration of labour and birth.

4.0 KEY POLICY PRINCIPLES

4.1 Women can be accompanied by their partner or nominated other to any of the above except in high/extreme surge (see Grid page 19).

4.2 There may occasions in individual HSC Trusts that visiting, for specific reasons, may be limited further than outlined in this guidance. This will most likely be to reduce the number of people in any one area to comply with social distancing rules. In this scenario, clear explanations will be given to women and their partner/nominated other.

4.3 **Members of the public who are experiencing the symptoms associated with COVID-19 should not visit maternity hospitals.**

4.4 Specifically the following will apply to visiting on antenatal and postnatal wards:

- a. Visitor numbers in maternity services will be restricted to one visitor per woman at any specific time;
- b. Women will be asked to nominate a maximum of two people (one will be the nominated birth partner) to be permitted access to visit throughout the duration of the hospital stay;
- c. In the event a nominated person becomes unwell another individual can be nominated;
- d. Where the patient is unable to nominate individuals, the next of kin will be asked to provide nominees;
- e. Visits will be for a maximum duration of one hour. Any exception to this must be agreed with the midwife in charge;
- f. The time of this visit should be agreed with the nominated visitor and the midwife in charge.

The Surge Grid outlines the Regional Surge Level Position using Critical Care capacity as the defining Surge Factor - this is subject to change and will be reviewed frequently.

Local outbreaks in HSC Trust areas and Care Homes may occur which will require a specific local response out with the regional pandemic surge level.

| Surge Level | High/Extreme Surge | Medium Surge | Pre/Low Surge |
|------------------------|--|---|---|
| Maternity Units | Birth partner will be facilitated to accompany the pregnant woman to labour ward for active labour and birth ONLY. | Birth partner will be facilitated to accompany the pregnant woman to dating scan, anomaly scan and for active labour and birth. | Birth partner will be facilitated to accompany the pregnant woman to dating scan, early pregnancy clinic, anomaly scan, and Fetal Medicine Department, for induction of labour, duration of labour and birth and, to visit in antenatal and postnatal wards as appropriate. |