

## HAVING A BABY WHILST LIVING IN GOCH, GERMANY

### Introduction

Welcome to pregnancy! This is the start of an incredible journey. Please contact the Hospital Hotline on 0800 5889936 as soon as you know you are pregnant. The Hotline staff will make an appointment for you to discuss your care pathways.

This information aims to answer some of the general questions you may have about having a baby in Germany. It is intended for Service and MOD-sponsored Civilian personnel and their dependants, married and unmarried, who are considering having a baby or are pregnant in Germany. For more information please visit [www.patient-wise.de](http://www.patient-wise.de). More specific aspects of pregnancy and birth can be obtained from the approved NHS Pregnancy and Birth books or log on to <http://www.nhs.uk/conditions/pregnancy-and-baby/pages/pregnancy-and-baby-care.aspx>

### Antenatal Care

Your care will be delivered by a community based Frauenarzt (Obstetrician), and a hospital Obstetrician who work in conjunction with a Host Nation midwife. The Frauenarzt for your area is Dr med Georg Ingenhaag, Wiesenstrasse 28, 47574 Goch. Tel: 02823 1646. Dr Ingenhaag and your Host Nation (HN) midwife will share your care, which includes monitoring you, your pregnancy and providing you with advice. The midwife practice "Rundum" provides services in Goch, Klever Str. 41, 47574 Goch. Tel: 02823 9755 633.

Following discussion with you, the midwife or doctor may refer you to other professionals. Health professionals providing care for you will record your progress in a maternity record. In Germany this maternity record is called a Mutterpass. You will be given your Mutterpass and be asked to bring it to each medical appointment, the record will be updated by the Service Provider during your pregnancy.

It is important to take your maternity record (Mutterpass) if you go to the UK (or other countries) so if you visit the midwife, hospital or GP whilst you are there, they can access previous information and record their findings.

### Data Protection

All staff have a duty to ensure that personal information, given in confidence, remains confidential. Sharing of information is strictly governed by information protocols and the Code of Practice for confidentiality. These are produced in accordance with the relevant UK and German legislation and good practice and are designed to protect your rights. All staff are required to work within these guidelines.

You may receive care from other professionals and so that all are able to work together for your benefit, information about you will only be passed on to the people who genuinely need it. You will be requested to provide written consent for your Host Nation GP, Community and Hospital staff to provide medical information to the Medical Administration Unit (MAU), Patient Support Officers (PSOs), and BFG Hospital Administration either in person or by telephone. This will enable information to be added to your medical documents and enable us to have relevant documentation

translated so that your medical records are complete on handover to another region or upon return to the UK.

The providers adhere to both the Data Protection Act 1998 and all statutory requirements regarding confidentiality or to the relevant German laws whilst following the appropriate guidelines for information security.

### **Place of Birth Options**

#### **1. Birth in Hospital**

Maternity care in German hospitals offer standards of care broadly equivalent to UK standards. However, there may be differences in the range of services provided; for example gas and air pain relief is not available in all hospitals, whereas complementary therapies, which are often not available in UK maternity units may be.

Importantly, please note:

That reimbursement of medical costs will not be authorised where entitled personnel choose to opt for private care and treatment, and will not be authorised if pregnancy and care provision is not notified to the Medical Administration Unit prior to commencing ante-natal care.

#### **2. Homebirth and Birth in a Midwife-led-Birthing Unit.**

Due to contractual and legal complexities, we do not provide a planned homebirth midwife led service in Germany.

If you would like a homebirth your current options are:

- Supported transfer to the UK for homebirth  
(It's normally safe to fly while you're pregnant. However, some airlines will not let you fly towards the end of your pregnancy, so you should check what your airline's policy is).
- Homebirth with a German Midwife at your own cost.

**Please note:** Neither SSAFA GSTT Care LLP nor British Forces Health Service are able to recommend specific Independent Midwives or Birthing Units.

### **What to expect in Hospital**

Your local hospital is:

St. Antonius Hospital

Kathol. Karl-Leisner-Klinikum

Albersallee 5-7

47533 Kleve

Tel: 02821 4900.

### **Registration at the Hospital**

When your Frauenarzt wants you to be seen for an antenatal appointment at the hospital please contact the Hospital Hotline on 0800 5889936 to arrange this. Even if your Frauenarzt has made an appointment at the hospital it is still important that you contact the Hotline.

### **Tour of the Maternity Unit**

“Parents-to-be” can visit the hospital and a tour of the maternity facilities can be arranged on request. Please call the Hospital Hotline during working hours on 0800 588 9 936 and we will be happy to make the necessary arrangements for you.

### **What to bring into Hospital**

A few personal items will make your stay more pleasant and comfortable. You will need to bring your own nightclothes, dressing gown, slippers and personal toiletries including towels. Personal music, books, magazines or other items to help you relax during your labour will make your stay more comfortable too. It is important to note that the hospital will not accept responsibility for any valuables you bring with you.

Except for clothes/car seat to take your baby home in, the hospital will provide everything else you and your baby may need during your stay. You must be aware that should you wish to bring any baby clothing, this will be at your own risk because these items can become mixed up with hospital laundry and may be lost.

You must take your handheld maternity record so that hospital midwives and obstetricians have all relevant information on hand.

### **Patient Support Services**

If you need language support whilst in hospital 24/7, please call the bilingual Patient Support Team via the Hospital Hotline on 0800 588 99 36. This is a Freephone number from a German landline, but if you use your mobile, your provider may charge for the call.

### **The Hospital Team**

The maternity unit is under the supervision of a senior consultant. The senior consultant leads a team of specialist registrars, 'house' doctors, midwives and nurses.

### **Hospital Facilities**

Each hospital has a number of delivery rooms, a nursery and an operating theatre. The rooms you stay in following birth have two to three beds and the rooms have en suite facilities. There is also access to telephone and television.

Please note that if you would like a single room, these charges and any associated costs, for private treatment will be your responsibility as neither SSAFA GSTT LLP nor BFGHS will reimburse these.

Please ask the hospital midwife or doctor for more details, either during pregnancy, labour or on admission to the postnatal ward.

Facilities for patients to store small quantities of food and drink may be available. The AKH Viersen offers the use of a family room, at your own cost, to allow your partner to stay with you and your baby. This facility is quite limited so if you wish to take up this option, please discuss with the hospital on admission.

There is a strict "No Smoking Policy" inside hospitals in Germany.

### **Admission to Hospital**

If you are in doubt about whether you should go into hospital, please contact your HN midwife for advice.

Any time you are admitted to hospital please contact the Hospital Hotline on 0800 588 99 36. This will enable them to liaise with the hospital to facilitate the payment of the invoice and also support you as and when required.

### **Birth Plan**

You are advised to point out your preferences about labour and the birth to the hospital midwife or doctor after you arrive in the delivery suite. It helps if your preferences have been recorded in the Birth Plan page of your handheld maternity record. Please be aware, that if safe to do so, your wishes will be met as far as it is possible and explanations given if this is not possible. It is important to know, that the hospital staff's main concern is to ensure the wellbeing of you and your baby. Your partner or a friend is strongly encouraged to support you throughout your labour and birth of your baby.

### **Admission Assessment**

As part of the assessment process, it is routine for the hospital midwife to record a trace of the baby's heartbeat, which also records any contractions. This is known as a cardiotocography (CTG). Your blood pressure and pulse will also be taken and you will be asked to give a sample of urine. A vaginal examination may take place to assess the stage of labour. Depending on the findings, including stage of labour, you may stay in the delivery suite or be given a room on the ward but you will be asked to report back to the delivery ward for regular checks.

### **Labour**

When in labour, you will be encouraged to do whatever keeps you most comfortable. The CTG will be repeated at regular intervals during the early part of your labour. Please review the list of things to take into hospital to make your stay more comfortable, as set out under the heading "What to Bring into Hospital". Whilst hot and cold beverages are available via vending machines, the cafeteria may be closed, so your birth partner may wish to bring a light snack.

### **Pain Control**

You will be encouraged to relax as much as possible during labour and, to help, the hospital promotes a tranquil and peaceful environment. A range of relaxation therapies is available that includes warm baths and in some units, homeopathy, aromatherapy and acupuncture may also be available. TENs machines are not provided, however, you are welcome to bring your own if you wish.

If you do require stronger pain relief you will be offered appropriate pain-relief according to the progress of your labour. This may include muscle relaxants, or painkillers by tablet or injection or an epidural. An epidural service is provided in all hospitals and is normally available 24/7. If you wish an epidural, you may have to wait a little if the anaesthetist is attending to an emergency at that time. An appointment to attend the anaesthetist prior to your Estimated Date of Delivery (EDD) can be arranged. This provides the opportunity to complete the consent for the epidural rather than going through this process when you are already in labour.

Please note Entonox (often known as gas and air) is not used as pain relief for labour in all the units in Germany, so you may wish to discuss alternate options with the hospital midwife or doctor during your pregnancy.

### **Vaginal Birth**

To give birth normally, you may choose whichever position you feel most comfortable with. This may be kneeling, lying on your side, crouching, using the birthing stool, other positions or even giving birth in the birthing pool if one is available in the Unit where you have your baby.

During pushing and giving birth, it is important to keep a close watch on you and your baby so continuous CTGs may be undertaken. If the birth needs speeding up for any reason, you may be advised to have a vacuum or forceps delivery. In this case, you will be asked to sit with your legs in

stirrups. An episiotomy is NOT routine, so it will only be done if the need arises at the time of delivery.

When the baby is born, dependent on your wishes, the midwife or doctor normally places the baby onto the mum's abdomen – your skin to the baby's skin assists with baby's temperature regulation and bonding – so if you do not wish this, please tell the midwife or doctor. If you or your partner would like to cut the cord, please ask when you are admitted in to the delivery suite.

It is routine to be given an injection to help the placenta (afterbirth) to separate and deliver the placenta faster to avoid excess blood loss. If you have any queries regarding this, it would be advisable to discuss this with the doctor or community midwife at your antenatal visits prior to labour commencing. Once the placenta is delivered, any tear or cut can be stitched under a local anaesthetic so that you do not feel it.

If you wish to breastfeed, your baby can be put to the breast whenever you are ready, with the midwife's help if required. Research has shown that (ordinarily) the sooner after birth baby feeds at the breast the more successful your breastfeeding will be. If you are not breastfeeding, skin-skin contact is still important. Please ask, should you need assistance.

Altogether you can expect a stay in the delivery suite for about two hours after your baby has been born so that observations can be taken, including the baby's first assessment. Depending on circumstances you may have a wash, if you wish, prior to going to the post-natal area or home. If all remains well, you and your baby will be transferred to the postnatal ward. Your baby will be given an identity label (arm band) before transfer from the delivery suite.

### **Caesarean Birth**

If you require birth by caesarean section, there is an integrated operating theatre within the delivery suite. In cases where an epidural/spinal anaesthetic is used it may be possible for your support person to accompany you to the operating room. Please be aware this is not so if you have a general anaesthetic. In case of a caesarean section the paediatrician attends and checks the baby immediately after birth. Usually, whilst the doctors/nurses attend to you, the father together with the midwife will take baby into a separate room to perform all necessary checks, record baby's details and allow for the new Dad to spend time with the baby. You will then join them once ready to leave the operating theatre.

### **Hospital Communication**

In the interests of your privacy, hospital staff are not permitted to give out details about the progress of your labour or about your baby's condition. Therefore, family and friends are requested not to telephone the delivery suite, and your birth partner will need to contact the people you wish to keep informed. Kindly note, mobile telephone use is restricted in the delivery suite and the neonatal unit as it may interfere with sensitive equipment.

### **Please note:**

In the unlikely event that your pregnancy is complex or baby needs special care you may be transferred to another hospital.

### **Vitamin K**

To prevent a very small percentage of babies from developing a bleeding condition, it is usual for babies to be given Vitamin K in their mouth to swallow. This is given shortly following birth and again at 4-7 days. Babies, who are exclusively breastfed, will be given a further dose at one month of age. If Vitamin K is given by injection, the baby does not normally need more doses. As it is not possible to predict whether a baby may develop the condition – which can be fatal or cause permanent harm

– Vitamin K is offered to all babies. You will need to consent or decline this, so please speak to the midwife for more information.

### **Postnatal Ward**

When you transfer to the postnatal ward with your baby, the nurse will orientate you to your room and ward facilities.

If you have had an epidural you are advised not to get out of bed on your own, as the loss of sensation in your legs - that can persist for a few hours – may lead to unsteadiness or falling. Instead, please call the nurse to help you, until the nurse/midwife advises you otherwise. If you experience pain after the birth of your baby, there are various methods of pain relief available. Please inform the midwife/nurse if you are uncomfortable and would like pain relief.

Following transfer to the post-natal ward, the nurse will examine your baby again in the nursery. Thereafter you are encouraged to keep your baby with you (known as rooming in) so that you get to know your baby and their cues for wanting a feed etc.

You will be encouraged to feed your baby on demand, including at night to maintain successful lactation. If you are breastfeeding, your baby will not be given formula milk without your consent. If you choose to give your baby a formula feed, the nurses or midwife will advise you.

### **Extra Help**

All the hospital staff are there to help you in any way possible. Please do not hesitate to ask for the help in terms of your care or the care of your baby. The midwives and nurses on the ward expect you to ask for help if you need it.

### **Rest Periods & Postnatal Visiting**

To recuperate, it is important to sleep or rest in the day, especially when babies feed frequently in the night. Therefore whilst partners and the mother's own children are welcome to visit the maternity unit, setting aside a rest period each day and actively discouraging visitors during rest periods is advised, as is consideration of other new mums and babies in the ward.

### **Length of Stay**

There are several factors that may influence the time you spend in hospital following the birth of your baby. As a general rule, providing you and your baby are well, following a 'normal' birth, discharge from hospital may be as early as six hours and following Caesarean Section from four days.

It is important that you obtain a discharge letter for you and your baby before leaving hospital to give to your GP.

### **Tests for Your Baby**

Tests are offered routinely. This is because many conditions are rare or unusual. If one of these conditions is present then outcomes for your child are better when this is identified and treated early. Although likely to be largely similar in the range of tests provided, the tests offered may vary by hospital. Please check with the hospital that you will be offered the following tests for your baby.

#### **1. Blood spot screening**

The blood is taken by way of a heel prick for various conditions. For more information ask the hospital staff or your community midwife. You can also log on to:

<http://www.nhs.uk/Conditions/pregnancy-and-baby/Pages/newborn-blood-spot-test.aspx>

## **2. Hip Screening Test**

All babies will be examined to ensure their hip joints have developed fully. An ultrasound scan will be undertaken during your hospital stay or arranged as an outpatient appointment.

## **3. Hearing Screening Test**

This test is performed with a hearing measurement device held externally to your baby's ear and detects if the baby is hearing properly. It does not hurt. Preferably, your baby will be asleep or very restless at the time of this test so an accurate reading can be achieved. This will be undertaken during your hospital stay or arranged as an outpatient appointment.

### U1- Examination

This will be done straight after baby's birth and will assess how baby managed to deal with the stress of the birth.

### U2 – Examination

Second check of baby between 3 and 10 days after birth. Depending on your length of stay, this will either be undertaken by the hospital paediatrician during your stay or if you leave the hospital early please contact the Hospital Hotline on 0800 588 99 36 on discharge to organise an appointment.

### Child's Record Book

All information about your baby, examination and test results will be recorded in a child's record book which will be handed to you on discharge from hospital.

### Going Home

It is a legal requirement to register your baby. Before going home from hospital, you should collect a notification of birth from the hospital. This will state where and when your baby was born, so you can register your baby. Do make sure you are in possession of this notification before you leave the hospital, as you will need this to register the baby's birth. (More information under Registration of Births).

It is a legal requirement and your responsibility, both in Germany and in the UK, to ensure that your baby is safe and secure in an approved child seat when travelling in a car.

Do please ensure that you have one available for your discharge from hospital.

### **Community Midwife Care**

During your antenatal care, the HN midwife from the "Rundum" practice in Goch will provide additional support as and when required. Following delivery, the HN community midwife for your area, will visit. It is important to contact the Hospital Hotline on 0800 588 99 36 to ask for assistance to arrange this.

### **The Health Visitor**

The health visitor will contact you during your pregnancy to discuss the care of your baby after the birth. The health visitor will support you and provide you with health and immunisation advice, and wherever possible, inform you of parenting and baby/toddler groups in your area. These groups are informative and help you to meet other new parents.

### **Vaccinations for your baby**

For vaccinations for your baby please talk to your health visitor who will be able to advise you on the routine schedule of immunisation for all babies.

### Paediatric Care

Paediatric care is provided by

Dr Krause

Gartenstrasse 4

47574 Goch.

Tel: 02823 25250.

## **Registration and Travel Documents**

### **Registration of Births**

You must take the birth notification issued by the hospital and both the mothers and fathers long birth certificates to complete the registration process. Registration of birth with the British Forces should be completed within 6 weeks. Births are registered by post with the Service Registering Office, G1 (BMD) HQ BFG in Bielefeld (BFPO 140). The birth certificate can only be produced once all documents have been received and checked and, unlike UK, this is not normally a one-day process. Registration of a birth may be undertaken by either parent (known as the informant). The 'informant' completes Form ORS1 (Rev April 07), and these forms are normally available from the Unit Welfare or Unit Admin Office, but can also be obtained direct from G1 (BMD) HQ BFG, telephone 0049 521 9254 2520. It is recommended that you speak with your Unit Welfare or Administration Office before the birth, to confirm the process, prior to forwarding the Registration Form ORS1, which must be countersigned by a commissioned officer (Captain or above/or equivalent).

When forwarding the Form ORS1 to register a birth, legible copies of the following must accompany it:

- Hospital Notification of Birth
- Birth Certificates of both parents (Long version only)
- Marriage Certificate (if married)

If you don't have long versions of birth certificates they are available for purchase on-line direct from the General Register Office at: <https://www.gov.uk/order-copy-birth-death-marriage-certificate>

If you are unmarried and wish to include the baby's father's name on the baby's birth certificate, the Registrar will require the baby's father's full birth certificate and you will need to complete a form of acknowledgement (ORS1A), which is normally to be submitted by the parent who is not in the Armed Forces. If both parents are serving then either may submit.

Full details of registration and examples of forms can be found at Section 1 to Standing Instructions for British Forces in Germany SIBF (G) 3221 available from Unit Welfare or Admin Offices. You will also find examples of a completed ORS1 form at annex A to the Standing Instructions. If you are a non-EU citizen, then you can register the birth with the Service Registering Office, but you must obtain an International Birth Certificate (at your own small cost) through the Town Hall of the town of the baby's birth. This is because parents need this International Birth Certificate to apply for the baby's passport in their country of origin.

### **Birth Certificates**

Birth certificates from the Service Registering Officer will be issued free of charge, and once a correctly completed ORS1 Form is received, it is normally processed within one week.

### **Passports**

Parents are advised to apply for their baby's passport as soon as possible after receiving the baby's full birth certificate. Passport applications forms are available from your Unit Welfare or Admin



Office. Once completed, Unit Admin Offices will process British passport applications, along with payment, to UK Authorities on the parent's behalf; in due course the baby's passport will be returned to the parents. Passports are provided free to MOD-sponsored personnel living overseas so parents are advised to check with their Welfare Office.

As part of the passport application process, parents must obtain 2 passport photographs of the baby, one of which must be countersigned by a Commissioned officer or equivalent. Advice on reclaiming the cost of these can be obtained from your Unit Admin Office. Please bear in mind that passports are now Biometric and photographs have to be exact measurements.

Depending on the time of year, obtaining a British passport normally takes around 4–6 weeks, but during busy holiday times, such as Easter, summer and Christmas, this may be even longer.

## **Rights and Benefits**

### **Maternity Leave**

Employed women who are pregnant or planning a pregnancy are advised to obtain their employer's maternity policy to ensure that they know their rights and can obtain the benefits and pay to which they are entitled. Notifying employers of your pregnancy is important because measures designed to protect a pregnant woman and her unborn child only apply when notification of pregnancy has been given. For Service personnel, please see the current Defence Instructions & Notices: Revised Maternity Arrangements for Service personnel in the Regular Armed Forces for information on MOD Maternity Policy and the Armed Forces Occupational Maternity Scheme, available on the Defence Intranet.

### **Paternity Leave**

If you are a father-to-be, you may have the right to paid paternity leave providing you meet certain conditions. Paternity leave is extra to normal holiday allowance. It is not the same as parental leave, which is unpaid leave that working parents can take to look after children under the age of 5. Employers have their own paternity and parental leave arrangements, so fathers-to-be are advised to obtain their employer's policy to confirm their entitlement. For civilian staff this may be via their line manager, whilst military staff may source advice from their Regimental Admin Office.

### **EHIC "European Health Insurance Card"**

This card covers the bearer for urgent and unforeseen treatment only in an EEA country outside the country of residence. In an emergency, the EHIC provides only the minimum level of local state treatment so it is strongly advised that parents obtain not only the EHIC but also personal travel insurance for all family members before travelling across European countries. The EHIC is available on-line at: <http://www.ehic.org.uk> or by calling the Application Line on 0044 300 330 1350. This is an answer-phone but you can let it continue to ring for personal assistance. Remember the EHIC can only be used if you cross European borders from Germany, it is not valid in Germany.

### **NHS Number for Babies Born to Service Personnel Based Overseas**

The NHS Numbers for Babies project was introduced in October 2002 and now the allocation of NHS numbers for babies soon after birth is part of UK statutory Birth Notification process.

The Ministry Of Defence has put in place arrangements to make sure an NHS number is issued for each baby born to service personnel, MOD sponsored civilians, entitled contractors and their dependants overseas. This includes those babies born to Foreign and Commonwealth families. The baby's NHS number is obtained after you have registered the baby at the MAU in Brunssum and a medical record is created.

**Child Tax Credit & Working Tax Credit Overseas**

UK Child Tax Credit and Working Tax Credit are subject to income. When claimed by Foreign & Commonwealth families, it must be claimed by the Head of Household. For more information please see your Unit Welfare Office.

**Child Benefit**

UK Child Benefit forms are available from the Unit Admin Office. When claimed by Foreign & Commonwealth families, it must be claimed by Head of Household. Claims need to be processed as soon as possible as Child Benefit can only be backdated by 3 months. The original of the baby's birth certificate is required.

**Service Families Accommodation**

Once confirmed pregnant, unmarried Servicewomen may apply for a Married Quarter (MQ), and families already living in MQ may be able to claim larger premises due to an increase in family size. If this applies to you, please raise this matter with your Unit Admin Office.

**Suggestions**

We hope this information has helped you understand the situation for Service personnel and their spouses living in Goch in Germany. If you have suggestions how we might improve we would like to hear from you. Please write to: [yourhealth@gstti.co.uk](mailto:yourhealth@gstti.co.uk)