



Who's Who in Pregnancy and Birth?

We've listed the people you are likely to meet whilst you are pregnant, giving birth and postnatally. Some are health care professionals specifically trained for maternity services – both hospital and community, some are 'generic' workers who you will find in other areas of the hospital and others are birth workers usually based outside of the hospital. Please be aware that this list is not exhaustive and that women and birthing people may be referred to other services if they have specific conditions, pre existing or otherwise.

Midwives

Everyone who is pregnant should be able to access care from a midwife. A midwife's expertise is in supporting straightforward pregnancy, birth and the early postnatal period, as well as having a high level of skill in detecting complications and providing support to deal with them.

Even if you have an extremely complex pregnancy, a midwife will still be available as part of the care team. A midwife will refer those in their care to a specialist midwife (e.g. a diabetes midwife) or to an obstetrician if they feel that they may benefit from additional medical care, but no one is obliged to accept this referral if they don't want it.

Midwives will have some training in breastfeeding support, and some may have taken additional training courses to gain a higher level of expertise. However, breastfeeding support is its own specialist area and, for many breastfeeding problems, a specialist such as a Breastfeeding Counsellor (BFC) or International Board Certified Lactation Consultant (IBCLC) may be better able to help (see below).

Some midwives have the title Consultant Midwife. These midwives have far more influence on the services offered in their area so they can be a helpful person to reach out to discuss your birth options.

Obstetricians

An obstetrician is a doctor who has been trained to provide medical care and surgical interventions during pregnancy, birth and postnatally. These include birth-related health conditions, such as hypertension, eclampsia, anaemia etc., or if there are concerns about a baby's wellbeing during pregnancy or labour.

Obstetricians will be at births where forceps or ventouse are used to assist the birth. For a caesarean, it will be an obstetrician who performs this surgery. Some obstetricians specialise in certain areas such as twin and pregnancies or maternal-foetal medicine (MFM) for those who have chronic health problems.

Sonographers

Obstetric sonographers use ultrasound technology and images to gather information about your pregnancy, such as dating your pregnancy and checking on the baby's growth. 'Having a scan' is the usual way of talking about it. Ultrasound technology is a diagnostic imaging technique used to see internal body structures such as tendons, muscles, joints, blood vessels, and internal organs.

Those you might see in Antenatal care:

General Practitioner (GP)

Your GP is not usually involved in your maternity care but you may choose to contact your GP to refer you to the maternity services. Your GP will still be available to you for any issues that are not pregnancy related. If your baby is born at home, they may carry out the NIPE (Newborn and Infant Physical Examination) test for newborns and the examination of your baby at 6-8 weeks. The GP will also offer you a 6-8 week check after your baby is born, to see how you are, checking any stitches you may have and offering contraception.

Obstetric Anaesthetists

During your pregnancy, you may be offered an appointment with an anaesthetist, who should discuss pain relief and anaesthetic choices for your labour and birth. They will give you an epidural if you have asked for one or if you have a planned or unplanned caesarean.

Neonatologists (Neonatal Paediatricians)

A neonatologist or neonatal paediatrician is a doctor who specialises in the care of newly-born babies or those born prematurely. If your baby is healthy you are less likely to see a neonatologist. There is likely to be a neonatologist at a caesarean birth and there will be two present at the birth of twins, one for each baby. If your baby is transferred to Special Care Baby Unit (SCBU) or Neonatal Intensive Care Unit (NICU) they will be cared for by the neonatologists.

Neonatal Nurses

Nurses who look after babies that are born prematurely or unwell are also in the maternity team. Most

neonatal nurses work in SCBU or NICU. If your baby is healthy and well you are unlikely to see a neonatal nurse. Their role is also to provide support for the parents of these infants.

Obstetric Physiotherapists

Obstetric physiotherapists specialise in the physical changes to your body that pregnancy and childbirth can bring. Specifically, they help those with abdominal separation and may run the Pelvic Girdle Pain (PGP) clinic for people suffering pain in one or more of the three pelvic joints during their pregnancy. Specialist physiotherapists may belong to the Pelvic Obstetric and Gynaecological Physiotherapy Network (POGP). Those who have had an instrumental birth, a third-degree tear or a caesarean section can be referred for advice on postnatal exercises to aid recovery. Sometimes this is available on the NHS, but waiting lists are often long, so some women prefer to seek out private practitioners.

Professional Midwifery Advocates (PMA)

The PMA is a midwife who has taken on additional responsibilities that should include being an advocate for women and their decisions. If your birth plan, or your decisions in pregnancy or soon after birth are not being supported by your midwife, you can contact the PMA.

All hospitals should have PMAs and their contact details on their website. Or you can phone the labour ward, or your own midwife, to ask for their contact information.

Maternity Support Workers (MSW)

MSWs are unregistered and support midwives to offer care to those who are pregnant and their families. They undertake duties in a maternity setting under the direction and supervision of a registered midwife. They provide support and additional care, but their duties may vary between hospitals.

Dietitians

Dietitians will assess your nutritional needs, identify any areas of concern and offer support to help you make diet and lifestyle choices for you and/or your baby. Those working in maternity services may help you with symptoms of pregnancy such as excessive nausea, vomiting, anaemia and with other medical conditions. They will help you maintain healthy weight gain, advise on nutritional supplements and special diets if you are already on a restricted diet, e.g. vegan or coeliac. Dietitians may see you if you have diabetes or develop gestational diabetes.

Mental Health Professionals

These professionals are specialists in supporting women and their families experiencing mental health challenges, including those conditions caused or exacerbated by pregnancy or birth. They may be

specialist midwives, health visitors or professionals within the mental health service working collaboratively with members of the maternity services team.

A survey by the Maternal Mental Health Alliance (MMHA) and the Royal College of Midwives (RCM) in 2014 across 18 UK health trusts found that roughly half of these trusts had specialist mental health midwifery roles in some capacity. The 'Maternal Mental Health Network' is a collaborative project that all maternity service professionals can use to ask questions and share ideas.

Interpreters and Translators

While interpreters and translators are not part of the maternity team, we have included them in this section as they are a critical part of some people's maternity care.

For a person to make an informed decision, they need to have properly understood the information that they have received. For this reason, the NHS states that...

Patients should be able to access primary care services in a way that ensures their language and communication requirements do not prevent them receiving the same quality of healthcare as others.

It is advisable to speak to your midwife or doctor about arranging appropriate translation or interpreting services during your birth well in advance. Hospitals and other health care services are not permitted to charge patients for the use of this service.

If you wish, you can have your partner, friend or support person interpret or translate for you. However, NHS best practice states that this should not be recommended, and, if you want to do this, that you should have another interpreter or translator speak to you first, independently of anyone else, so you can state your preference in private.

For more information, see the NHS guidance:

www.england.nhs.uk/wp-content/uploads/2018/09/guidance-for-commissioners-interpreting-and-translation-services-in-primary-care.pdf

Those you might see in Postnatal care:

Health Visitor (HV)

Health Visitors are qualified or registered nurses or midwives who offer child health and development support to parents. Once you are signed off by the midwifery service you will be offered a variety of services from the HV. In addition, HVs will usually offer a home visit before your baby is born to introduce themselves and to talk through any questions that you might have about caring for your new baby. Part of the purpose of this antenatal visit is for the health visitor to ensure that the family is

providing a safe environment. In addition to home visits, HVs usually run clinics, which may be available to just walk-in, or they may have a booking system. These can be a useful resource for getting your baby weighed, or checked, if you have any concerns and to talk about any issues you may be experiencing.

The HV service is available until your child is of compulsory education age, when the school nurse takes over that role. The school nurse is also available to children who are educated outside of school.

Infant Feeding Specialists

There are three main qualifications for infant feeding specialists:

- **Breastfeeding Peer Supporters** (sometimes known as Mother Supporters).
Peer supporters have completed somewhere around 20 hours of training in supporting normal breastfeeding and have personal experience of breastfeeding. Ideally, peer/mother supporters will have trained with regionally recognised organisations, or with one of the four national breastfeeding charities (see below) to ensure high quality training, and some will have been trained by the local hospital. They can be an invaluable resource for helping women to deal with straightforward breastfeeding challenges. Peer supporters are usually volunteers, but some are employed by the NHS. Peer supporters should also have training in formula feeding and mixed feeding.
- **Breastfeeding Counsellors**
Breastfeeding Counsellors in the UK are trained by leading breastfeeding charities. This training is significantly more intensive than that offered as standard to midwives and health visitors. Breastfeeding counsellors are usually volunteers or private practitioners, but occasionally they are employed by the NHS. Breastfeeding counsellors should also be able to offer support with formula feeding and mixed feeding.
- **International Board Certified Lactation Consultants (IBCLC)**
An IBCLC has completed 1,000 hours in practice in a supervised setting and passed written examinations. Often, they will also be a trained health professional such as a nurse or midwife. They usually work as volunteers or private practitioners, and are occasionally employed by the NHS.

The terms 'peer supporter', 'mother supporter' and 'breastfeeding counsellor' are unprotected in law, meaning that anyone can refer to themselves with these terms, so it's always worth asking to see certification of training.

If you are seeking support for infant feeding you might prefer to reach out to the main UK charities for information on who is local to you, as their training is of a consistent, high standard. You can find a list of the charities which train Breastfeeding counsellors, and the UK's listings of IBCLCs, on the AIMS website, www.aims.org.uk/general/rights#19

More information on the who's who of Breastfeeding can be found here on the Birth Hub website thebirthhub.co.uk/2015/07/27/the-whos-who-of-breastfeeding

Other Birth Workers:

Doulas

Doulas are sometimes employed by the hospital, but are usually employed privately by individuals. They offer a wide range of non-clinical support to both the person who is pregnant and their wider family. They may be able to help you to plan your birth, signpost you to information, help with advocacy when you are interacting with midwives and doctors, and offer practical, physical and emotional support during the birth of your baby. While doulas may also be qualified midwives, they are not allowed to offer you clinical midwifery care in your labour unless they are currently on the register of midwives with the Nursing and Midwifery Council (NMC), and in that case, they must also have appropriate indemnity insurance.

A doula may attend your birth without a midwife or doctor being there as well, if you want, but they can't act as a midwife or doctor. The term 'doula' is not a protected term. There are a number of doula training companies whose training is approved by Doula UK, and you may wish to see if the doula you are considering has completed one of these approved courses. For more information, see the Doula UK website: www.doula.org.uk

Hypnobirthing Practitioners

A hypnobirthing practitioner may be a midwife, obstetrician, doula or other birth worker. Hypnobirthing is an antenatal education programme which you might be able to access as a free course in an NHS hospital or check with your midwife for courses in your local area. Practitioners will teach you relaxation, visualisation and breathing techniques and simple self-hypnosis skills. They may be there for your labour if it is your midwife, obstetrician or doula who has these skills.

Antenatal teacher

An antenatal teacher is a midwife or a lay person who delivers antenatal education. You might be able to access a free NHS antenatal course held in your hospital or a community venue. These are usually but not always delivered by a midwife. There are also many private providers who offer antenatal education. Both NHS and private courses will usually include preparation for birth and at least some preparation for parenthood, but they vary a lot in length and the range of topics they cover. Antenatal teacher is not a protected term and there is a wide variation in the level of specialised training that the teacher will have had, so you might want to check their qualifications.