



Eich cyf/Your ref RR/KS/VG
Ein cyf/Our ref VG/08147/20

Rob Roberts MP
Member of Parliament for Delyn

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9 November 2020

Dear Rob,

Thank you for your letter of 20 October regarding preventing lone births during the COVID-19 pandemic.

I understand it must be a worrying time for any woman who is pregnant during this pandemic. Please be assured the safety and wellbeing of all mothers and babies, as well as the staff who support them, is at the heart of the guidance on women being accompanied by their partner or nominated person, when accessing maternity services during the current time.

The latest guidance to health boards was issued on 20 July and was implemented across Wales. If the requirements of infection prevention and control can be met locally, in line with national guidance, when a woman is attending the hospital for the following reasons they may be accompanied by their partner or nominated person (preferably from the same household):

- early pregnancy assessment unit scan (EPAU)
- early pregnancy dating scan (11 weeks + 2 days to 14 weeks + 1 day)
- fetal anomaly scan (18 to 20 weeks + 6 days)
- attendance at Fetal Medicine Department

Partners can also attend the birth of the baby from the time a woman is in active labour and for some time after the birth. In the case of a planned Caesarean Section this is a local decision based on a Health Board's own risk assessments and will have due regard to the safety of the woman and baby and the doctors, midwives and fellow health professionals who are responsible for her care.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and responding in Welsh will not lead to a delay in responding.

At most other times when a woman is in the maternity unit, she will be sharing spaces and facilities with other women and their babies. We recognise that procedures such as early labour, induction of labour and the postnatal period are important times when women would wish their partner or identified other person to be present for support but in order to reduce footfall in shared areas we are cautiously reviewing these on an ongoing basis. To prioritise the safety of all women, babies and the staff in the unit, visitors are currently limited to ensure infection prevention and control measures can be achieved to reduce transmission of coronavirus. It is imperative for health boards to maintain physical space in maternity services to keep women and their babies safe. This applies not only in clinics and in waiting areas but on postnatal wards also, where distance between bed spaces and flow through wards need to be considered.

All women who need to remain in hospital following the birth of their baby will continue to receive individual support from the midwives and other health care professionals to care for their baby and maintain their own well-being.

However, health boards will also take into account any individual circumstance a woman may have, for example, mental health needs, a learning disability or cognitive impairment where support is needed in order to process information. Whilst we cannot comment on individual cases, midwives / obstetricians will be able to make reasonable adjustments, when the well-being of a woman and baby require it, whilst taking into account the risks for all involved. We would expect the clinical team to work with any woman with additional needs to explore all the options, including diverging from the visitor guidance if necessary, and agree together how best to provide support at this important time. In cases where there is an outbreak within a community and/or hospital, local decisions on restricting hospital visiting will be part of the Health Board's management process. In cases where there is an outbreak within a community and/or hospital, local decisions on restricting hospital visiting will be part of the Health board's management process. We advise people contact their designated hospital for updates.

If an individual is feeling anxious about anything, they should speak to their midwife about their concerns and feelings, as they are there to provide support and guidance. They will also be able to support them after they have returned home and discuss any concerns they have during the handover to their health visitor.

We are in the process of updating the guidance to incorporate health board flexibility to modify local visiting arrangements following an in-depth local risk assessment. I aim to publish this revised guidance in the week commencing 23 November and we are currently working closely with health boards and clinicians to finalise it.

I hope this information is helpful.

Yours sincerely,



Vaughan Gething AS/MS

Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services