

Standard Operating Procedure: Unaccompanied babies in the maternity unit

1. Introduction and overarching policy/guideline

This Standard Operating Procedure is designed to provide comprehensive care and support for babies who find themselves without a legal guardian in the maternity unit. This protocol has been designed to address situations where babies are left unaccompanied due to various circumstances, such as a mother requiring medical attention in a separate area or concerns for the baby's safety pending court decisions or local authority arrangements.

It is of paramount importance that every baby's well-being is safeguarded and their holistic needs are met during their stay in the maternity unit. This operating procedure serves as a guide to ensure that no baby is left unattended, and that appropriate care is provided at all times.

This procedure operates in conjunction with the [3](#), enhancing our commitment to ensuring the safety, protection, and well-being of every baby in our care.

By adhering to this operating procedure, staff members will be equipped with the necessary steps and actions to ensure that unaccompanied babies receive the attention, care, and support they require.

2. Procedure to be followed when an unaccompanied baby is being cared for on the maternity unit

In the following sections, we will outline the precise steps that staff members should follow when faced with situations involving unaccompanied babies. From addressing their immediate needs to facilitating communication and collaboration among the various stakeholders, this procedure ensures a unified and structured approach to providing the best possible care for these vulnerable babies.

Immediate Family Care:

- If the mother is unwell, an immediate family member can care for the baby.
- Staff must recognise the mother's parental responsibility, shared with her spouse if married.
- Consent authority lies with the mother, except in emergency cases based on the baby's best interests.
- A dedicated side room is allocated for the baby and family member.

Alternative Care within Maternity Unit:

- If no family member is available, the baby remains in the maternity unit.
- An assigned staff member cares for the baby until further arrangements are made.
- Notification and Support Request:
 - via the Matron for Safe Staffing or out of hours the manager on call who will complete a 1:1 risk assessment and contact bank office to arrange cover.
 - A staff member is allocated to provide 1-1 care for the baby.
 - This staff member exclusively cares for the baby and is not responsible for other women/birthing people.

Escalation and Consultation:

- If no staff member is available and bank support is unavailable:
 - Consultation with neonatal unit matron, consultant, and neonatal discharge and family care co-ordinator.
 - If necessary, the baby transfers to the nursery department within the neonatal unit.

Reporting and Communication:

- Whether cared for by a relative or staff member, report in daily tactical meetings held twice a day.

The above process ensures that unaccompanied babies in the maternity unit receive appropriate care either from immediate family members or designated staff members, with escalation and reporting mechanisms in place to address any challenges.

Safeguarding:

- If a baby is abandoned by its mother prior to social care going to court to obtain an order, such as an Emergency Protection Order (EPO) or Interim Care Order (ICO), then social care need to be contacted immediately, mother to be made aware that she would be classified as 'abandoning her child'.
- Social care needs to convene an urgent strategy discussion.
- If out of hours or mother adamant on leaving the hospital and abandoning her baby in the maternity unit, then the police are to be called to issue a police protection order (section 46).
- Please escalate any concerns with babies requiring safeguarding to the Safeguarding Team to expedite to social care for a timely resolution.

Contact:

Maternity Safeguarding Midwives- ext. 16432

Children's Safeguarding Nurses- ext. 15770

3. Education & Training

Annual mandatory safeguarding training is undertaken by all Trust employees including volunteers within UHL. All safeguarding training is part of UHL mandatory training schedule in line with LSCB Intercollegiate Guideline Document 2019

4. Monitoring Compliance

What will be measured to monitor compliance	How will compliance be monitored	Monitoring Lead	Frequency	Reporting arrangements

5. Supporting References

[Safeguarding in Maternity UHL Obstetric Guideline](#) (Trust ref: C53/2019)

6. Key Words

Abandoned, Emergency Protection Order (EPO), Interim Care Order (ICO), Safeguarding

The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination and treat all individuals fairly with dignity and appropriately according to their needs.
As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.

CONTACT AND REVIEW DETAILS			
SOP Lead (Name and Title) Rheo Knight – Matron		Executive Lead Chief Nurse	
Details of Changes made during review:			
Date	Issue Number	Reviewed By	Description Of Changes (If Any)
	1		