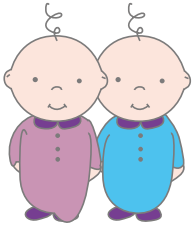
EN

MOTHER/CHILD DEPARTMENT

MATERNITY



EDITH CAVELL - SITE DELTA

INFORMATION ABOUT:

- Your stay in the maternity ward
- Feeding your baby
- Your return home...





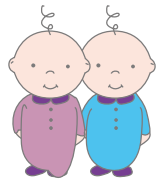
CHIREC - SITE DELTA
Boulevard du Triomphe, 201-1160 Bruxelles

CHirec SITE DELTA

www.chirec.be

In accordance with ministerial guidelines, we would like to inform you that the average length of stay in the maternity ward will be approximately 3 days.
Therefore, to provide you with the best possible support once you return home, we have introduced postnatal check-ups, carried out by a paediatrician or a midwife.

WELCOME TO OUR MATERNITY WARD
EDITH CAVELL - DELTA HOSPITAL



Dear Madam, Dear Sir,

We are delighted to welcome you to our institution, and we thank you for the trust you have placed in us.

This leaflet has been designed to answer any questions you may have regarding your pregnancy, your delivery, choosing your baby's diet, and your return home.

It provides information on the various administrative and practical procedures to follow before your admission to hospital. You will also find information on how our maternity ward operates.

If you would like to familiarise yourself with the hospital environment, group sessions are organised with our midwives (workshops for expectant parents, breastfeeding evenings, etc.). In addition, information sessions on pain management, led by an anaesthetist and a midwife, are held regularly. Please note that most of these sessions take place in French.

Enquiries: https://chirec.be/fr/centre/maternite-delta

You may also, if you feel the need or if you wish to discuss your birth plan (available on our website, in the 'Delivery Room' section), arrange an individual meeting with a midwife ('Rencontre' consultation). Please also note that other midwives, working closely with gynaecologists, provide antenatal care ('antenatal' consultations).

To make an appointment, please call +32 2 434 81 12.

Please do not hesitate to speak to your gynaecologist about any questions relating to your delivery and your stay at our hospital: choice of room, financial arrangements, quotes, etc., and to discuss informed consent with them.

The Maternity Ward team.

CHIREC
DELTA HOSPITAL

Since December 2017, the CHIREC Group has been organised around three hospital sites: DELTA Hospital (500 beds), St-Anne St-Remi Hospital (300 beds) and Braine-l'Alleud–Waterloo Hospital (300 beds). Two one-day clinics (Clinique de la Basilique and Clinique Edith Cavell) and four polyclinics (Parc Léopold, Europe-Lambermont, City Clinic Louise and Jean Monnet) round off the range of healthcare services on offer.

THE DELTA HOSPITAL: A PATIENT-CENTRED HOSPITAL

Located at the heart of one of Brussels' major transport hubs, the Delta Hospital brings together the hospital activities of the Edith Cavell and Parc Léopold Clinics.

The hospital's architectural design is based on the building's overall functionality, the analysis of patient flow and the user-friendliness of the spaces.

Everything has been designed to minimise the distance travelled from the car park and public entrances to even the most remote hospital departments.

Inside the hospital, traffic flows are clearly separated by dedicated routes for staff on the one hand, and for patients and visitors on the other, thereby facilitating access to services.



Throughout the development of the project, we have prioritised optimising the reception and well-being of our patients.

Particular attention has been paid to comfort features such as soundproofing, natural light, lighting and temperature control.

All the finishes are designed to create a harmonious, understated, bright and modern atmosphere. Elements symbolising nature can be found on various levels.



ACCESS TO DELTA HOSPITAL



BY CAR:

- From Boulevard du Triomphe, access is possible regardless of the direction of traffic, thanks to the installation of new traffic lights.

BY TRAIN:

- There are two stations serving the hospital: DELTA and ETTERBEEK.

METRO :

- The DELTA metro station on Line 5 is right next to the site (500 metres).

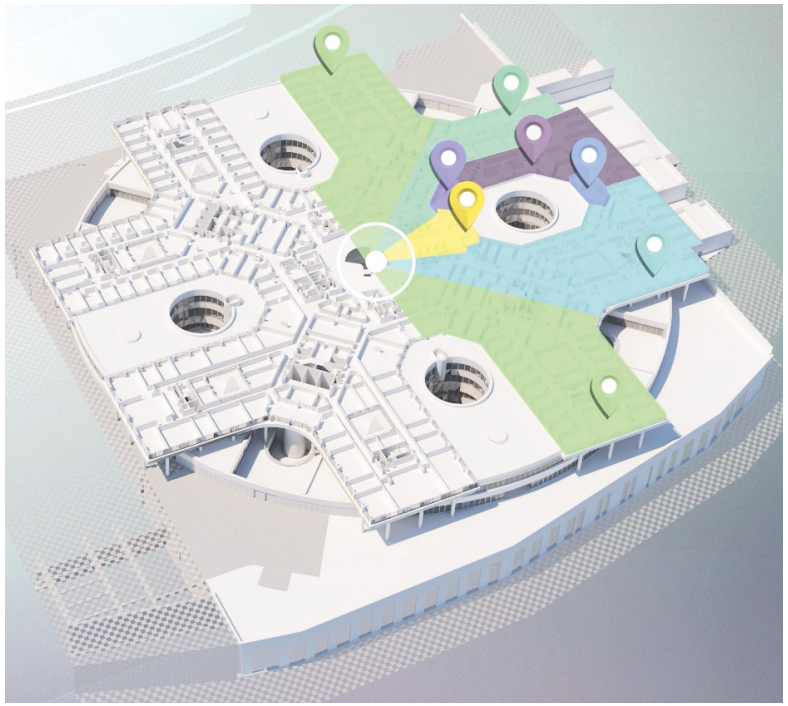
BY BUS :

- Bus routes 71 and 72 serve Boulevard du Triomphe.

THE ‘EDITH CAVELL’ MATERNITY WARD AT DELTA HOSPITAL

A modern, light-filled maternity unit, in keeping with advances in medicine and the needs of new mothers.

All maternity services are located on the **2nd floor** to ensure the best possible care for mums and babies.



- Reception
- Delivery suites
- C-section
- Intensive and non-intensive neonatal care
- High-Risk Pregnancies
- Postnatal units (Maternity)

SOME INFORMATION

If you experience any problems or are at risk of preterm labour during your pregnancy, your gynaecologist may admit you to the high-risk pregnancy unit (MIC: Maternal Intensive Care).

It is in this unit that outpatient monitoring and pre-operative consultations (for caesarean sections) take place, by appointment, by calling +32 2 434.82.86. This unit works in close collaboration with the neonatal intensive care unit (NIC: Neonatal Intensive Care). Both are among the 19 recognised centres in the country.



SOME USEFUL NUMBERS

Hospital Reception	02 434 81 11
Admissions	02 434 80 20
Monitoring and pre-operative consultations	02 434 82 86
Delivery suites	02 434 82 73
High-Risk Pregnancy Unit	02 434 82 70 (2H)
Maternity Unit (Post-partum)	02 434 82 11 (2B)
Maternity Unit (Post-partum)	02 434 82 61 (2G)

Postnatal consultations are also available, both at the hospital and at home.
To book an appointment: +32 2 434 17 50.

DELIVERY SUITES

In line with our care policy, which is based on the recommendations of the IHAB (Baby-Friendly Hospital Initiative, a quality assurance scheme supported by the WHO and UNICEF), we do everything we can to ensure you receive personalised support tailored to your needs and those of your baby.

WHEN SHOULD YOU GO TO THE DELIVERY SUITE?

If you experience painful contractions, a loss of amniotic fluid, bleeding, or a reduction in foetal movements…
A video entitled '*Your arrival at the maternity ward*' is available on our website.

Furthermore, if you have any doubts whatsoever, please do not hesitate to call the delivery suite on **+32 2 434 82 73.**
Please do not share this number with your family

WHAT DO YOU NEED TO BRING WITH YOU WHEN YOU ARE ADMITTED?

Various documents:

- ☐ The mother's identity card (or passport).
- ☐ The marriage certificate or marriage record.
- ☐ The identity card of the person accompanying you who will complete the admission formalities.
- ☐ The card or document confirming cover for hospitalisation (MediCard DKV, HospitPlus, etc.).
- ☐ The 'Declaration of Choice of Surname' document.
- ☐ The referral form (provided by your gynaecologist).
- ☐ Any deposit required for your hospital stay, if you are not covered by a Belgian health insurance scheme.
- ☐ Your bag for the delivery room.
- ☐ Your suitcase for the maternity ward.







WHAT TO PACK FOR YOUR ARRIVAL AT THE MATERNITY WARD

FOR YOU (MOTHER)

- ☐ Two short, loose-fitting nightdresses
- ☐ A bathrobe
- ☐ Slippers
- ☐ A large terry towel
- ☐ A toiletries bag
- ☐ Miscellaneous: books, music, biscuits, energy drinks … and anything else that helps you feel at your best
- ☐ A glass or stainless steel water bottle

FOR YOUR BABY

We recommend washing everything at least once before use.

- ☐ A long-sleeved cotton bodysuit
- ☐ A pair of pyjamas and a hat
- ☐ A blanket

(No umbilical cord bandages or nappies).

LABOUR & CHILDBIRTH

Our care philosophy is based, amongst other things, on the 'Mother Friendly' concept, which commits us to respecting your needs and those of your baby during labour and delivery.

You are therefore welcome to have a person of your choice, in addition to your partner, support you throughout labour and during delivery. Please remember to discuss this with your gynaecologist beforehand.

If the situation allows, you will be able to have a light snack or a drink. Whilst keeping a close eye on your health and that of your baby, we try to avoid invasive procedures such as artificially breaking the waters, accelerating or inducing labour, instrumental delivery, episiotomy and caesarean section.

HOW CAN YOU COPE WITH PAIN?

Everyone has a different pain threshold.
There's no such thing as pain-free childbirth...

WE THEREFORE ENCOURAGE YOU TO:

- Follow a antenatal programme that suits you (physiotherapy, sophrology, haptonomy, emotional preparation for childbirth) and which will help you get to know your body better.
- Walk, keep moving and try different positions to help labour progress.
- Consider non-medicinal methods to relieve pain (dilatation bath, massage, relaxation, birthing ball, etc.).
- Finally, if you wish, an anaesthetist available 24 hours a day can administer an epidural.

CHOOSING A POSITION FOR CHILDBIRTH

You are free to choose your position for giving birth, but please remember to discuss this with your gynaecologist beforehand.

WELCOMING YOUR BABY

Welcoming your baby with respect is one of our top priorities. If both you and your baby are well enough, you will be invited to hold your baby close to you, skin-to-skin, and keep them with you for at least an hour, in a calm and warm environment. This is a special moment for you to bond and form those first connections. Skin-to-skin contact helps your baby make a gentle transition from your womb to the outside world. It reassures them through familiar cues (smell, sound, etc.).
This moment is unique and magical. Discover the benefits of skin-to-skin contact by scanning the QR code below:

Positioned close to your breast in this way, and if you so choose, your baby will be able to feed whenever they wish. They will not be bathed to prevent them from losing too many calories as they cool down. After about two hours, you and your baby will be taken to your room.

WHAT SHOULD YOU PACK FOR YOUR STAY?

FOR YOU (MOTHER)

- ☐ A few pairs of cotton and/or mesh knickers.
- ☐ Nightdresses or pyjamas, or better still, loose-fitting nightshirts.
- ☐ Nursing bras (a style that allows you to fully expose your breasts).
- ☐ Terry towels and washcloths.
- ☐ A toiletries bag.

Tip: a banana-shaped cushion is very useful for supporting your back and resting your elbow whilst your baby feeds (whether breastfeeding or bottle-feeding)…

FOR YOUR BABY

- ☐ Cotton wrap-around bodysuits.
- ☐ A few pyjamas.
- ☐ Pairs of booties or socks.
- ☐ Cloth nappies (tetra or fleece are recommended) measuring at least 60x60 cm to make swaddling the baby easier.
- ☐ A toiletries kit: a mild, soap-free cleansing gel*, as natural as possible (bar soap is not recommended in a hospital setting, but is fine at home), a hairbrush or comb.
- ☐ Terry towels and 4 cotton washcloths**.
- ☐ A digital bath thermometer.
- ☐ Clothes washed at least once with a mild soap (avoid fabric softeners) and suitable for the season, to be worn on the day of discharge from the maternity ward.

Your stay lasts an average of 3 days. Please bring at least one change of clothes for your baby each day. You do not need to bring nappies. You can buy them at the Maternity Ward. At present, you can also hire washable nappies for a daily fee.

* At the maternity ward, you can buy a cleansing solution that meets the criteria listed above.
** Small washable squares made from bamboo micro-terry can be purchased at the hospital.

HOW IS YOUR STAY IN THE MATERNITY UNIT GOING?

The whole team is delighted to welcome you and look after you during your stay. To make things easier for you, we'd like to outline what a typical day is like in our ward:

CARE:

Throughout your stay, a midwife will visit you to look after you and your baby. She will be on hand whenever you and your baby need her, even at night!
Please feel free to call her whenever your baby needs feeding.

Another tip: enjoy skin-to-skin contact with your baby 'whenever you like', whilst ensuring their safety.

MEALS:

Meal trays are served at around 8.00 am, 12.00 pm and 6.00 pm. They are collected approximately one hour after being served, provided you have finished your meal.

HANDOVER (CHANGE OF SHIFT):

At 7.00 am and 8.15 pm, a handover takes place between the day and night teams to ensure continuity of care and support for each patient and her baby.

Mother and baby together: It is important for your baby to stay with you throughout your stay. This closeness will strengthen the parent-baby bond and make it easier for you to recognise your baby's needs and signs of alertness.

DURING THE DAY:

You will be seen by:

- your gynaecologist,
- the paediatrician,
- the physiotherapist.

If you wish, a team of psychologists specialising in supporting pregnant women, new mums and babies is available to you; simply ask the midwife or one of your doctors.

BATHING YOUR BABY

To minimise your baby's energy loss during the first few days of life, they should not be bathed every day. Their first bath should be given no earlier than the day after tomorrow following their birth.

Do not forget the 'skin folds' (neck, behind the ears, groin). It is recommended that you clean their bottom and genitals at every nappy change using a mild cleansing solution and water.

VISITS

Visits are, of course, a source of joy. However, the arrival of a newborn means that everyone needs time to adjust. You will be looking after your little one day and night and will be devoting a great deal of time and energy to them. The nursing team understands the importance of tailoring their care to the sleep patterns of both babies and their mums.
That is why we would like to emphasise the importance of adhering to visiting hours and the duration of visits.

For the partner and siblings:

- From 3.00 pm to 8.00 pm
- Private room: the co-parent is welcome at any time, day or night.
- Double room: the co-parent is asked to leave the room by 8.00 pm at the latest.

For relatives:

- From 5.00 pm to 7.00 pm.
- Two people at a time and a maximum of four different people.

SOME USEFUL INFORMATION

Some medical information

Several screening tests are carried out during the perinatal period to detect very rare diseases or conditions which, if treated early, offer a better prognosis for the child.

Here are the various tests carried out during the first few days of your baby's life:

- Blood screening for certain rare diseases.
  The results are only communicated to the paediatrician within the following month if they require further investigation or are abnormal.
- Screening for cyanotic heart defects.
- Hearing screening.

Information available (in French only):

Administrative formalities for registering your baby

Every child born in Belgium must be registered with the Registrar of the municipality of birth, within **15 calendar days** of the birth.
For all births taking place in Auderghem, this registration must be carried out **EXCLUSIVELY** at the Civil Registry Office **located on the ground floor of Delta Hospital**, Boulevard du Triomphe 201, 1160 Auderghem.

Following this declaration, you will receive the documents required to enrol your baby in a health insurance scheme and to claim child benefit.
Enrolling your baby in a health insurance scheme is a priority.

If you are unable to make this declaration within the statutory time limit, please notify the Civil Registry Office as soon as possible.

There are no exceptions (such as nationality) to this legal obligation.

BIRTH REGISTRATION PROCEDURE

In all cases, please bring with you:

- your respective identity cards and/or residence permits and passports if you are a foreign national,
- the document '*Déclaration de naissance - Formulaire à compléter*', duly completed and signed by both parents (available in the 'Passport' folder '', in the maternity ward or at our offices on the ground floor of Delta Hospital).

If you are married:

- Respective identity documents and the document *'Déclaration de naissance - Formulaire à compléter'* (see below).
- Marriage certificate (if you were married in Belgium).
- Foreign marriage certificate – original, translated and legalised * **

PLEASE NOTE – IMPORTANT

*** Any document originating from abroad, from a consulate or an embassy** must, where applicable, be legalised (see link below) and/or translated into French or Dutch by a sworn translator (whose signature is certified by the Ministry of Justice).
https://diplomatie.belgium.be/en/legalisation-documents

**** A marriage contracted abroad must be registered with your local authority to ensure it has legal effect.**

If you are not married:

- Respective identity document(s) – see the procedure above.
- If there has been a prenatal acknowledgement of paternity or maternity, one of the parents may attend alone, bringing the acknowledgement document. **Prenatal acknowledgement (by the father or co-parent) must take place in your local authority area.**
- If there is no prenatal acknowledgement, the child may (subject to verification of the records) be acknowledged at the time of the birth registration. In this case, you must **absolutely attend together when registering the birth.**

If paternity or joint parenthood is not being consider:
The child's mother must come forward within 15 days, as stipulated in the procedure above.

Please note that:
If this is **your first child together**, you will choose the surname, which will be shared by any subsequent children born to the same couple. You will complete the section entitled '*Déclaration de choix de nom*'.

If this is not your first child together (for Belgian children: the child will bear the same surname as their older sibling(s), unless otherwise specified) **or if the child is not a Belgian national**, you must complete the section '*Choix de la loi applicable à la détermination du nom de votre enfant*'.

For children who are eligible for multiple nationalities, including Belgian nationality, and subject to the provision of a certificate of nationality for the child and/or any other necessary documents, we may, in certain cases, apply foreign law to the determination of the child's name. These specific cases will be examined during your visit to our offices.

Opening hours of the Auderghem Registry Office:

Monday to Friday, 8.30 am to 1 pm (afternoon appointments available).

Changed opening hours from 1st July to 31 August: 8 am to 1 pm.

Please note: Please book an appointment by telephone or email, stating the child's date of birth and the mother's name. **If you arrive without an appointment, we cannot guarantee that your case will be dealt with immediately.**

Telephone number: 02/676.49.08
e-mail: chirec1160@auderghem.brussels

Your child's registration with your local authority is carried out automatically electronically between the two local authorities.



FEEDING
YOUR BABY

Quel que soit votre choix en ce qui concerne l'alimentation de votre bébé, l'équipe soignante sera toujours disponible pour vous aider.

On the following pages, you will find practical information (first breast-feed…), general information (colostrum, your baby's rhythms, skin-to-skin contact, bonding, breast engorgement, manual expression), as well as the benefits of breastfeeding for you and your baby.

A list of book titles and websites on breastfeeding will round off this chapter.

Nature has provided everything needed to ensure breastfeeding goes smoothly.
The vast majority of women are able to breastfeed their babies, regardless of the size and shape of their nipples.



HOW DOES BREASTFEEDING WORK IN OUR MATERNITY UNIT?

DURING PREGNANCY:

How and where can you find information during pregnancy?

- Through your gynaecologist and/or paediatrician.
- At workshops for expectant parents (practical and interactive workshops): register via the maternity unit's website.
- At group information sessions on breastfeeding: information and registration via our website.
- During individual breastfeeding consultations offered by a midwife or lactation consultant (manual expression of colostrum, previous difficult experiences, etc.). To book an appointment: 02/434.17.50.
- By reading books, leaflets or websites (see references at the end of this booklet).
- Through breastfeeding information and support organisations.

AT BIRTH:

If your condition, and that of your baby, allows, you will have the opportunity to hold your baby against you, skin-to-skin.

Skin-to-skin contact promotes: the stimulation of milk production, the maintenance of your baby's body temperature and the formation of an emotional bond.
This close, special contact will help you to tell when your baby is ready to feed. Moreover, it is not limited to the delivery room. We will encourage you to continue this in the maternity ward and, of course, at home.

Immediately after birth, your baby will be placed near your breasts and will feed as soon as they are ready to do so.

Some babies show signs of being ready to feed within the first hour of life, whilst others will not feed straight away and will need a little time before they get started.

If your baby needs to be admitted to the neonatal unit, rest assured that every effort will be made to ensure you can breastfeed them despite this separation.

WHAT YOU NEED TO KNOW BEFORE GIVING BIRTH

COLOSTRUM

In the first few days, your baby feeds on colostrum, which provides everything they need in terms of both quantity and quality (vitamins, antibodies, proteins, etc.).

THE BABY'S RHYTHMS

Most of the time, the baby is very alert in the first two hours after birth. Offer the breast if the baby shows signs of wanting to suckle (for example, if they put their fingers in their mouth, stick out their tongue, make sucking noises, etc.), or if their eyes are wide open (= signs of alertness). Don't wait until they cry.

For the first few feeds, we recommend that you ask one of the midwives to help, so that she can make sure you and your baby are comfortably positioned.

This will be a chance to try out other breastfeeding positions, whether sitting or lying down.

It's then up to you to find the ones that suit you best (lying down, the 'classic' sitting position, cross-legged, with the baby straddling you, the rugby ball position, the BN 'Biological Nurturing' position, etc.).

You can offer your baby the breast whenever they ask for it, rather than following a fixed schedule.

From the 2nd and 3rd days onwards, your baby will wake up and feed more often. The number of feeds is important at the start of your breastfeeding journey: **8 to 12 feeds per 24 hours**.

This frequency meets your baby's needs and will help you produce enough milk.

You should also be aware that your baby will develop significantly in the first few weeks and that the feeding pattern will vary before eventually settling into a routine. Don't be surprised if your baby is more active or more alert at night or at certain times of the day.
In fact, the 'day-night' rhythm develops naturally over the first few months. So, adapt your own routine to your baby's, and have a nap whenever you get the chance.

A peaceful atmosphere is important, especially at the start of breastfeeding. Ensure your peace and privacy are respected whilst feeding.
Make the most of your stay in the maternity ward to rest as much as possible.

At first, it is not advisable to offer your baby a dummy, as this can disrupt the process of learning to suckle at the breast, reduce the number of feeds, and thus interfere with the successful establishment of lactation.

If your baby is crying and refuses to feed, comfort them.

MY QUESTIONS :

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.....

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.....

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NURTURING AND SKIN-TO-SKIN CONTACT

SKIN-TO-SKIN CONTACT

Skin-to-skin contact promotes:

- the regulation of blood glucose levels (blood sugar) during the first few hours of life,
- the stimulation of lactation,
- the maintenance of body temperature,
- the sleep-wake cycle,
- the formation of an emotional bond.

Your baby will feel reassured and their weight loss will be reduced.



NURTURING

Despite external opinions that often equate the need for physical contact with mere whims, nurturing will, on the contrary, strengthen your child's independence.

During the first few weeks, it is important that your baby spends as much time as possible snuggled up close to you, where they can settle down and get to know you (mum or co-parent).

BREAST ENGORGEMENT
(Incorrectly referred to as 'milk coming in')

After a few days, your body will start to produce more milk to meet your baby's needs. This natural change is sometimes accompanied by a feeling of tightness or swelling in your breasts. This is known as *engorgement*. This condition may last for a week.

At the same time, your baby may be more active, more alert and feed more often. You may be able to hear them swallowing.

If your breasts become excessively engorged, you should report this to the healthcare team so they can monitor the situation. There are several ways to relieve the discomfort.

This period may be accompanied by the *baby blues*.

MANUAL EXPRESSION OF BREAST MILK

This technique, which midwives will show you either in the delivery room or in the maternity ward, may be useful at any time – whether to collect milk whilst waiting for your baby to be ready to feed, in preparation for an absence, to make latching on easier by reducing tension in the areola, or to relieve a blocked breast.

Having had the opportunity to meet with a midwife during your pregnancy to guide you through manual expression of colostrum will make this practice easier.

In consultation with your gynaecologist, this can be done from 36–37 weeks of pregnancy.

THE BENEFITS OF BREASTFEEDING

FOR YOUR BABY

As well as being economical and environmentally friendly, breastfeeding promotes:

- optimal nutrition,
- a reduced risk of infection,
- a reduced risk of certain allergies,
- a reduced risk of developing
- chronic diseases, childhood cancers, etc.
- a reduced risk of obesity,
- ...

FOR YOU

Breastfeeding goes beyond simply being 'convenient':

- It creates a hormonal environment that promotes deep sleep through the release of oxytocin.
- It enables the uterus to return to its original size more quickly (i.e. the uterus returns to its original position more rapidly), meaning you will experience less postnatal bleeding.
- Helps you lose the weight gained during pregnancy.
- Reduces the risk of certain types of breast cancer.
- ....

WOULD YOU LIKE TO FIND OUT MORE?

BROCHURES AND BOOKS

- Infor-Allaitement, *Vous souhaitez allaiter, vous allaitez déjà*, 2010.
- Infor-Allaitement, *J'attends des jumeaux*, édition revue en 2020.
- Infor-Allaitement, *Positions d'allaitement*.
- Infor-Allaitement, *Travailler et allaiter,* 2020.
- ONE - Kind en Gezin

WEBSITES

- http://www.infor-allaitement.be
- http://www.one.be ou http://www.kindengezin.be
- SPF Santé Publique : Comment allaiter : health.belgium.be
- lalecheleague.be
- ingridbayot.com (publications)

Through these websites, you can order some very interesting leaflets.

YOUR RETURN HOME

Coming home marks the start of a new phase, sometimes referred to as '*the 4th trimester of pregnancy*'. This is a time of discovery, adjustment, getting used to things and recovery.

Leaving the maternity ward is no doubt a joyful occasion for you, but at the same time it may make you feel a little anxious, especially if this is your first baby.

Like most parents, you're probably a bit apprehensive about the moment when you'll find yourselves 'on your own' with your baby at home. Rest assured, you'll find your feet and settle into your new routine, far removed from the routine of the maternity ward.

We, the maternity ward staff, are often delighted and amazed to see how parents become experts on their own babies!

If you're wondering, 'Do I have enough milk?', take a good look at your baby: if they're lively, swallowing regularly, wetting their nappies well (5 to 6 heavy nappies in 24 hours) and having regular bowel movements (soft stools), you can be sure they're getting enough to drink!
Checking their weight will confirm that your baby is getting enough milk.

After a few days, you'll be delighted to be back with your family at home… However, if you have any concerns or need reassurance, please don't hesitate to ring the maternity ward where you were staying or to contact one of our lactation consultants.

Before you leave, one of our midwives will arrange your follow-up care at home, either with our team or with the midwife you saw during your pregnancy. Please do let us know.

We can't resist giving you (yet another!) few tips...

Get some rest!

Live at your baby's pace; have a nap if you feel the need.

It's very important to get enough sleep to 'keep going'; otherwise, everything will seem harder.

Avoid having visitors during the first week; take the time to look after yourself first.

Do not forget to eat!

Do some shopping in advance, cook some meals and freeze them.

A balanced and varied diet is recommended.

Treat yourself – and let others treat you, too!

Anything goes, except for alcoholic and stimulating drinks.

Get some help

At times, you may feel exhausted or overwhelmed.
So, ask for help! Surround yourself with people who care.

Be specific; don't be afraid to say what you need and what you'd like!

Your loved ones will be delighted to offer targeted help: a shopping list, a pop to the chemist's, a meal prepared in advance, and so on.
However, you'll need to steer their help in the right direction so that it suits you.

Having someone you trust to support you can make all the difference.

Your baby's feeding and sleep

Continue to feed on demand.

Your baby will gradually settle into a more regular feeding pattern.
If you're breastfeeding, continuing to bond with your baby will help them through this transition period.

In the first few weeks, they should feed at least 8 times in 24 hours, and if they have loose, plentiful stools several times in 24 hours (between 3 and 8 stools in 24 hours), then they're certainly well-fed!
In older babies, bowel movements may be less frequent.

Quickly forget the idea that a newborn just sleeps and eats!
Some are heavy sleepers, others sleep very little…
They also have other needs: to be held, rocked and reassured by your arms and your voice; to feel close to you; to smell your scent.

Remember that every child is different, and that one solution does not suit them all.

You'll learn to recognise their needs.

If you have any concerns or questions about bathing, feeding your baby, their weight gain, their daily routines, weaning, sleep, family life, etc., please do not hesitate to seek information and help from your paediatrician, gynaecologist, the maternity ward's psychologists, home care midwives, a lactation consultant, or various associations and organisations.

You've embarked on a truly wonderful adventure; we wholeheartedly wish you a family life filled with moments of joy, both big and small.

In summary, here is the QR code that will allow you to watch the informative videos on the various topics covered, and much more...

Continuing to breastfeed

The WHO recommends continuing exclusive breastfeeding for six months.

YOUR RIGHTS:

The end of your maternity leave is fast approaching, and you may already be facing many questions and concerns about weaning.

Returning to work does not necessarily mean the end of breastfeeding! There are several options available to you to continue breastfeeding your child:

- If you work in a high-risk environment*, you may be entitled to prophylactic breastfeeding leave, paid for by your health insurance provider, which ends on the day before your child's 5th month.

- You may be granted further standard breastfeeding leave by mutual agreement with your employer if you work in a sector where a collective agreement provides for this type of leave (unpaid!).

* Federal Public Service (FPS) Ministry of Employment and Labour:
Rue Ernest Blérot, 1 – 1070 Brussels.
Phone: +32 2 233 42 14 or http://www.emploi.belgique.be

- Under certain conditions, the parent(s) may be entitled to a career break as part of parental leave, either on a full-time, part-time or one-fifth-time basis, depending on their original working hours. This leave may be taken for each child before they reach the age of 12 (see the ONEM T19 website).

- You may be eligible for a career break under the 'time credit' scheme; this scheme is not solely intended for child-rearing and is available to both parents equally – the options are the same but the conditions differ significantly (see the ONEM T160 website).

- You are also entitled to breastfeeding breaks; your employer cannot refuse them to you. You can retain this right for 9 months after the birth of your baby.
  You are entitled to 30 minutes for every 4 hours worked and two 30-minute breaks for a working day of up to 7.5 hours (paid for by your health insurance fund).
  Your employer must allow you to breastfeed or express milk in a room provided for this purpose.

- At present, you must give your employer two months' notice before returning to work.

Check with your employer, your health insurance provider and the Federal Public Service for Employment and Labour.

- You are, of course, also entitled to take unpaid breastfeeding leave if your employer agrees.

- Paternity leave is intended for the father or co-parent. The 20 working days must be taken within four months of the birth, for both employees and the self-employed.

We hope you will be very satisfied with the quality of the care and services provided during your stay with us. However, we would be delighted to hear how satisfied you are so that we can continue to improve.

We would be grateful if you could share your suggestions with us using the questionnaire you received on arrival.

Please place this in the 'Quality Service' box in the ward.

With our deepest sympathy,
The Maternity Ward team.

Notes

CHIREC
HOSPITAL GROU^P

Hospital sites - Brussels



Site DELTA
Boulevard du Triomphe, 201 - 1160 Bruxelles
☎ : 02 434 81 11



Site STE-ANNE ST-REMI
Boulevard Jules Graindor, 66 - 1070 Bruxelles
☎ : 02 434 31 11

One-Day Clinics - Brussels



BASILIQUE
Rue Pangaert, 37-47 - 1083 Bruxelles
☎ : 02 434 21 11



EDITH CAVELL
Rue Général Lotz, 37 - 1180 Bruxelles
☎ : 02 434 81 01

Polyclinics - Brussels



PARC LÉOPOLD
Rue du Trône, 100 - 1050 Bruxelles
☎ : 02 434 81 03



City Clinic Louise
Avenue Louise, 235B - 1050 Bruxelles
☎ : 02 434 20 00



EUROPE - LAMBERMONT
Rue des Pensées, 1 - 5 - 1030 Bruxelles
☎ : 02 434 24 11

Hospital and polyclinic - Brussels



BRAINE-L'ALLEUD - WATERLOO
Rue Wayez, 35 - 1420 Braine-l'Alleud
☎ : 02 434 91 11



JEAN MONNET
Avenue Jean Monnet, 12 - 1400 Nivelles
☎ : 02 434 79 11