

# **Care Pathway for Management of** **Neonatal Death on Central** **Delivery Suite**

(Please use this Pathway in conjunction with the Policy for the  
Management of Fetal Loss, Still Birth and Neonatal Death)



*Addressograph*

*Gravida* \_\_\_\_\_ *Parity* \_\_\_\_\_

*Gestation* \_\_\_\_\_

## Neonatal Death when cared for on CDS Clinical Pathway

Actions	Yes/No	Date/Time	Signature of Clinician
<b>Birth Details</b> Time..... Date .....			
<b>Time of Death</b> Time..... Date..... Confirmed by .....			
Sensitively inform parents of their baby's death & parents appropriately supported by staff.			
Consultant Obstetrician Informed (If not already Present)			
Consultation between Parents and Senior Registrar/Consultant at appropriate time following death			
Allow Parents the privacy to spend time with their baby			
Coroner informed by Registrar/Consultant if necessary* and reason for contacting Coroner explained to parents.  *only refer to Coroner if there has been medical intervention and signs of life are shown. If MTOP has been carried out and signs of life are shown referral to Coroner must take place as medical intervention has taken place. If spontaneous pre term delivery and neo natal death due to severe prematurity and paediatricians have been involved in decision making and no medical intervention coroner does not need to be informed. Please refer to Policy for the Management of Fetal loss, Stillbirth and Neonatal Death which can be found on WISDOM.			
Discuss Lactation Process with parents. If Mum wishes for Lactation Suppression, please ensure Carbergoline 1mg prescribed on Medication Chart. <b>Caution should be taken if history of pre-eclampsia when prescribing Carbergoline.</b>			



	Yes/No	Signature	Date
Sensitively discuss Contraception and offer if appropriate prior to discharge home			
<b>Offer family the opportunity to create memories:</b>  -Use items within memory box  -If appropriate obtain hand and foot prints.  -Offer parents opportunity to take photographs. <b>Please Use the Camera on CDS &amp; provide the parents with the memory card for them to keep. If parents do not wish to see their baby or make memories, please offer to take photographs and hand and footprints and place in an envelope in Maternal Notes clearly labelled in case parents change their mind at a later date.</b>  -Weigh baby  -Offer parents opportunity to dress their baby and provide options of clothing available i.e angel pockets, angel gowns, small clothes available if they do not have their own items  -Hand and Footprints <ul style="list-style-type: none"> <li>- Ibrahim's Gift</li> <li>- Heart in my Hand</li> <li>- Towel</li> <li>- Lock of hair if possible</li> <li>- Offer Chaplaincy Blessing</li> <li>- Weight/Length of Baby (offer tape measure to keep.)</li> <li>- Bathing the Baby</li> <li>- Dressing the Baby</li> <li>- Offer a set of name bands to keep</li> </ul>			
Offer to take baby home if appropriate please consider if CFC and liaise with safeguarding team and inform Mortuary Staff			
-Offer details to be completed in Babies Book of Remembrance (paperwork within pathway)			
Discussion of post mortem by appropriately trained staff. If no Post Mortem please discuss placental histology. <b>Do not give time scale for decision for PM – parents can change their mind at any time.</b> <b>Name of staff who has discussion:</b>			
Discussion regarding funeral arrangements and advise that they will be responsible for arranging funeral and will have to register their Baby's death. Guidance can be provided by Bereavement Midwife upon discharge if required.			
Use Cuddle Cot/Cooling Plate			



Religious and cultural beliefs discussed and respected. Please use Switch for on-call Chaplin or contact families own Chaplin if preferred			
Complete WPAS. NHS Number should be generated when completing WPAS when a baby is born showing signs of life and registered as a live birth.			
Where a baby is born and dies on Labour ward and support and a plan of care has been implemented by the Neonatal Team a set of notes will be generated by the Neonatal Team and a summary of care will be generated by the Neonatal Team.			
Place Identity Bands on Baby with own Hospital Number			
Place Birth in the Birth Register as live birth			
Doctor to complete Neonatal Death Certificate as appropriate. If discussion with Coroner to take place Death Certificate cannot be complete until decision made from Coroner's office.  <b>Death Certificate - Death Certificates not to be given to parents. Certificate scanned and emailed to <a href="mailto:Deathregistrations@swansea.gov.uk">Deathregistrations@swansea.gov.uk</a>. Original certificate then sent to Registry Office by recorded delivery.</b>			
Examine the Placenta and obtain placental swabs if still available in time frame of delivery.  Ensure Placenta is placed in white pot and labelled with mother's details on the outside of pot with Histology form. <b>Placenta to be taken to the mortuary within 8 hours of delivery.</b>			
Complete: - Identity Bands - Birth Register - WPAS - DATIX complete and Incident Number - If Congenital Anomaly suspected please refer to CARIS at <a href="mailto:Caris@SafehavenMailbox@wales.nhs.uk">Caris@SafehavenMailbox@wales.nhs.uk</a> and include mothers name, mother's date of birth, mother's NHS number and the suspected diagnosis.			
<b>Post Mortem accepted:</b>  All Wales PM consent form completed and signed: - <b>Please use the New All Wales Fetal Post Mortem Consent Form that can be found on CDS</b>  <ul style="list-style-type: none"> <li>- <b>Original Copy parents have written on to go with baby to mortuary with all other documentation</b></li> <li>- One copy to be given to parents</li> <li>- One copy filed in maternal medical records</li> <li>- Examine placenta, take swabs for C&amp;S. <b>Transport to the mortuary within 8 hours of delivery.</b> Baby can follow if parent's memory making</li> </ul>			



<ul style="list-style-type: none"> <li>- Fetal Examination Form completed</li> <li>- Photocopy obstetric/neonatal notes and scans to go with baby in envelope to the mortuary</li> <li>- <b>Complete request form for examination of fetus from Dpt of Pathology (UHW)</b> which can be found on the Z drive: Maternity: service wide communications: Bereavement: Paediatric PM referral form.</li> </ul>			
<b>Name of Person Obtaining Post Mortem Consent and ensure is appropriately trained.</b> .....			
Discussion regarding funeral options available as parents will have to make own arrangements as neonatal death regardless of gestation. Discuss Burial or Cremation, Baby Gardens that are available at Margam, Bridgend and Morriston. Funeral will be funded by WGA but some costs may occur such as casket, flowers and order of service. A £500 grant will also be offered when registering baby.			
Discuss with Consultant if post-natal Maternal Bloods are required (investigation blood chart within pathway)			
<b>Discuss If Mum wishes for Lactation Suppression and information has been provided regarding lactation. Please ensure Carbergoline 1mg has been administered if mum has chosen for assistance with lactation suppression.</b>			
Cremation/burial form signed and completed. If Cremation, please use Cremation form 4 that can be found on CDS.  Original to go with baby. (photocopy and place in notes)			
Email Bounty at <a href="mailto:bereavements@bounty.com">bereavements@bounty.com</a> to prevent contact with family.			
Were the Paediatric Palliative Care Team Involved in the care of Baby			
Email Bereavement Midwife to inform of Bereavement using referral form.			



## Investigations

All cases	<u>Unexplained</u> IUD	Specific to cause
<p><b><u>FBC, G&amp;S:</u></b></p> <p><b><u>Coagulation</u></b> screen including fibrinogen;</p> <p><b><u>Kleihauer:</u></b></p> <p><b>Fetal post-mortem</b> (full / limited);</p> <p>Cytogenetic analysis in relevant cases;</p> <p><b>Placental Histology – Sent to UHW</b></p> <p><b>Person who delivers the baby should document:</b></p> <ul style="list-style-type: none"> <li>degree of maceration of skin</li> <li>any obvious external abnormality of features or limbs</li> <li>baby's weight and overall impression - IUGR/normal/macrosomia</li> <li>gender and name given by parents, if known;</li> </ul> <p><b><u>Fetal anomaly</u></b></p> <p>CARIS form to be completed.</p>	<p><b>CRP;</b></p> <p><b>TORCH, Parvo virus, Rubella, Syphilis</b></p> <p>(particularly in presence of polyhydramnios and/or fetal hydrops);</p> <p><b>Thyroid Function Tests;</b></p> <p><b>Placental swab for microbiology;</b></p> <p><b>Placental Histology – Sent to UHW ;</b></p> <p><b>HbA1c;</b></p> <p><b>MSSU, HVS or LVS.</b></p> <p><b>* Blood for anti-platelet antibodies only required if autoimmune thrombocytopenia suspected *</b></p>	<p><b><u>Placental abruption</u></b> –</p> <p>Placental histology, thrombophilia screen.</p> <p><b><u>Chorioamnionitis</u></b></p> <p>Infection screen including blood cultures, placental swab, swabs from baby.</p> <p><b><u>If IUGR suspected</u></b></p> <p>Lupus-anticoagulant;</p> <p>Anticardiolipin antibodies;</p> <p>Factor V Leiden Prothrombin gene mutation;</p> <p>*Repeat thrombophilia and APLA screen 6 weeks post delivery;</p> <p>Placental Histology;</p> <p><b><u>If h/o itching or jaundice</u></b></p> <p>LFT and bile acid.</p> <p><b><u>Parental karyotyping</u></b></p> <p>Indicated if:</p> <ul style="list-style-type: none"> <li>- fetal unbalanced translocation;</li> <li>- other fetal aneuploidy, e.g. 45X;</li> <li>- fetal genetic testing fails and history;</li> <li>- Suggestive of aneuploidy (fetal abnormality on post-mortem, previous unexplained IUFD, recurrent miscarriage).</li> </ul>

- An abnormal result might not be linked to the IUFD but rather be simply an incidental finding
- Comprehensive investigation can be important even though one cause is particularly suspected
- Parents should be advised that no specific cause is found in almost half of stillbirths
- Parents should be advised that when a cause is found it can crucially influence care in a future pregnancy

**NB:** An abnormal test result is not necessarily related to the IUFD; correlation between blood tests and post-mortem examination should be sought. Further tests might be indicated following the results of the post-mortem examination.



### **Investigations All Cases**

FBC – Purple bottle

Coagulation and Fibrinogen – Blue Bottle

Group and Save – Pink Bottle

Kleihaur – Pink

Placental Histology sent to Cardiff in a white tub with Histology form completed with all clinical information and addresses to Cardiff.

**If Fetal anomaly please complete CARIS card.**

### **IUGR or below 10<sup>th</sup> centile**

Thrombophilia Screen – 2 purple bottles, 6 Blue Bottles, 1 Gold Bottle

TORCH/Parvovirus – Gold Bottle

Lupus- 2 Blue Bottles

Factor V Leiden – Purple

Anti- CardioLipin Antibodies– Gold Bottle

### **Infection**

Blood Cultures – Blood Culture Bottles

CRP – Yellow

HVS- Black Charcoal Swab

Placental Swabs (fetal and maternal) – Black Charcoal Swabs

### **Hydrops**

Anti Ro/La – Gold Bottle

Parvovirus – Gold

Anti Red Cell Antibodies – 2 Purple Bottles

### **Hypertension/PET**

PCR, U + E, LFT, Urate – Yellow Bottle

Thrombophilia Screen - 2 purple bottles, 6 Blue Bottles, 1 Gold Bottle

### **Diabetes**

HbA1c- Purple

### **Abruption**

Thrombophilillia Screen - 2 purple bottles, 6 Blue Bottles, 1 Gold Bottle

### **History of Itching or Jaundice**

LFT and Bile Acids – Gold Bottle

### **No Obvious Cause**

Bile Acid – Gold Bottle

HbA1c – Purple Bottle

TORCH & Parvovirus – Gold bottle

Thyroid Function - Gold Bottle

Thrombophilia Screen - 2 purple bottles, 6 Blue Bottles, 1 Gold Bottles





## **Transfer of Infant to Mortuary following Late Miscarriage, Medical Termination of Pregnancy, Intrauterine Death or Neonatal Death**

### **In All Cases Placenta must be sent to Cardiff UHW Pathology Department for Histology Investigation**

**Placenta placed in a placenta bucket with Mums Information labels present and Histology form completed to go to Cardiff Pathology.**

**Placenta to be refrigerated in Mortuary within 8 hours of delivery. Placenta can be taken separately if parents are memory making with infant.**

**Ensure Infant/Fetus/Placenta have correct identifiable labels/ ID bands in situ (If NND or Stillbirth Infant/fetus will have own hospital number)**

**If post mortem is requested all appropriate paperwork present and antenatal notes photocopied and kept with infant at all times upon transfer. Paperwork place with infant at all times**

**If no post mortem requested appropriate paperwork for gestation completed including cremation forms, chosen funeral arrangements of parents' wishes or sensitive disposal if below 24 weeks gestation.  
**PLACENTA TO BE SENT TO CARDIFF UHW FOR HISTOLOGY INVESTIGATION. MUST BE TAKEN TO MORTUARY AND SIGNED INTO THE ALLOCATED AREA BY MIDWIFE****

**If Mortuary Technician present inform of transfer between 1pm-3pm Monday-Friday. If out of these hours please document all information in the register held in the allocated storage area.**

**Infant wrapped appropriately to maintain dignity and respect and placed in Cot.  
Transferred to Mortuary with Midwife and porter.**

**On arrival the porter will direct you to the allocated area where you will place the infant. Please complete the Register situated within the allocated Storage area with all relevant details.**

**Place details on white board on the front of allocated area and state if Post Mortem requested**





### **Part 3: Prior to Discharge Home**

ACTIONS	Yes/No	Signature	Date
Community Midwifery Team and Named Midwife informed of Baby's Death and first visit arranged.			
Notify Ante Natal Clinic to cancel an appointments			
General Practitioner informed			
Health Visitor informed			
Bounty Suppression form completed and emailed. <a href="mailto:Bereavements@bounty.com">Bereavements@bounty.com</a>			
Bereavement Specialist midwife emailed using referral form.			
<b>Death Certificate</b> -Original Certificate scanned and emailed to <a href="mailto:Deathregistrations@swansea.gov.uk">Deathregistrations@swansea.gov.uk</a> . <b>Do not give certificate to parents.</b> Original certificate then sent to Registry Office by recorded delivery			
All belongings given to parents prior to discharge			
Foot/Hand prints and Clay Print Set in Bereavement Box offered to parents			
All Memory Making items provided to the parents			
Offer parents the option to take baby home if appropriate – consider CFC, social issues. Liaise with Safeguarding Team if needed. <b>Please inform on call mortuary staff, Bereavement Midwife and Community Midwifery Team if parents taking baby home</b> Advise that parents can return baby to Singleton Mortuary and discuss with mortuary staff arrangements or contact chosen funeral director if arranging own funeral. <b>Please complete the Release Forms within the Pathway *</b>			
Contact details for the Bereavement Specialist midwife given to parents and referral completed and emailed.			
Advise of available support: Community midwife, bereavement midwife, support groups, counselling.			
Take home medication provided if required. If parents need to return to collect medication, please arrange appropriate time and location. Consider parents feelings if having to return to collect.			
12 week appointment provided to parents to discuss PM and/or placenta histology explain maybe delay in results but aim for 12 weeks. <b>Please send notes to Obstetricians Secretary</b>			
If NICU involvement 6-8 week appointment to be arranged with Consultant Secretary			
Provide Specific Discharge Paperwork for Bereaved Parents for Community Midwife and contact numbers			



## **Taking Baby Home**

- Parents who wish to take their baby home If the cause of death has been established (i.e. Medical staff are happy to issue the death certificate) and the death is not for Coroner investigation, the family should be offered the opportunity to take their baby home. The Release forms within the pathway have to be completed. One copy placed in the medical notes, one copy sent to the mortuary and one copy to the Patient Services Officer.
- The mortuary has to be informed of all deaths, however, they can be contacted in working hours and the family can take the deceased home without attending the mortuary. A mortuary technician is on call out of hours and can be contacted via switch to advise if parents are taking their baby home from CDS/NICU.
- If the family have agreed to a post mortem, the deceased can still be taken home but the family would need to bring the deceased back to the mortuary within around 24hrs.
- A cold cot should be provided to the family with instructions for its use.
- The police are to be contacted via 101 and the registration of the car supplied in the event there is an accident. The baby can be transported in a Moses basket or a car seat if parents wish.
- A member of staff is to accompany the parents to the car.
- The Matron is to be advised of the situation if within office hours. If out of hours the on call manager for Women and Child Health is to be informed.
- Please inform Specialist Bereavement Midwife and Community Midwifery Team in order to ensure support is offered when parents leave the hospital with their baby
- The death certificate is completed by a senior medical staff member and given to the parents before they leave with their baby, if possible. (During COVID 19 Pandemic the Death Certificate is scanned and emailed to [Deathregistrations@swansea.gov.uk](mailto:Deathregistrations@swansea.gov.uk) and **original copy send by recorded** delivery).
- Parents should be informed that they will be required to register the birth and death at County Hall as soon as possible.
- Following death, a discussion should be had with family by a senior member of the team regarding any questions they may have concerning their care.
- As part of each review we endeavour to answer parent questions and feedback at a bereavement appointment.
- Offer referral to Specialist Bereavement Midwife and complete referral form and provide contact details should parent wish to contact. Consider referral to charity support services such as Ty Hafan (before death) and "2wishuponastar" with family consent.



## Release of Baby/Child's Body to parents prior to funeral

**Please complete this form if parents choose to take their baby home following their death**

**Release of Baby/Child's Body (any gestation where there have been signs of life (neonatal death)) to parents prior to funeral**

Baby/Child's Name		
Hospital Number		
Ward		
Date of death		
Mother's Name		
Father's Name		
Address where Baby/Child will be residing until funeral		
Funeral Home telephone number		
Bereavement Midwife		
Community Midwife		
General Practitioner		
Health Visitor		
Name of Doctor Administering Death Certificate		
Name of Funeral Director to be contacted for collection of Baby		
Registration of Vehicle Transporting Baby Home		
Contact Police on 101 to advise of discharge		

We/I accept full responsibility to ensure safe keeping of our Baby/Child

Signed:

.....

Witnessed by:

.....

Designation:

.....

Date:

.....

**Please give copy of form: 1) Mortuary 2) Patients medical notes 3) Copy to parents if wish**



**Please complete and give this form to parents who take their baby's body home and may need to provide information to appropriate persons such as emergency services in the event of an accident /emergency**

**TO WHOM IT MAY CONCERN**

This is to confirm that (name(s) of parent(s))

\_\_\_\_\_

Of(address)\_\_\_\_\_

Have taken their baby's body from (name and address of hospital)

on Date \_\_\_\_\_

I / We, the parent(s), hereby take full responsibility for our baby whilst they are in our care.

We will (tick as appropriate):

- Return our baby to the hospital on (date)\_\_\_\_\_
- Make our own arrangements for our chosen funeral director to arrange a funeral

Parent(s) Name(s) (please print):

\_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

**Name of staff member** (please print) \_\_\_\_\_

**Position** (please print) \_\_\_\_\_

**In case of advice or concern please contact:**

Staff member's name \_\_\_\_\_

Job Title \_\_\_\_\_

Department direct line \_\_\_\_\_ Signature \_\_\_\_\_

24-hour phone contact for support \_\_\_\_\_

Bereavement Midwife Christie-Ann Lang Telephone 07766466896

Email [Christie-Ann.Lang@wales.nhs.uk](mailto:Christie-Ann.Lang@wales.nhs.uk)



## Bereavement Support Following Pregnancy Loss or Neonatal Death Referral Form

Patients Name	
Hospital Number	
Date Of Birth	
Contact Telephone Number	
Address	
G.P	
Named Consultant	
Family Members	
Date of Bereavement	
Name of Baby if relevant	
Gestation	
Post Mortem	Accepted <input type="checkbox"/> Declined <input type="checkbox"/>
CFC	
Reason for Referral	
Relevant Medical History	
Previous Obstetric History	
Referred By	

Please return completed forms to:

Christie-Ann Lang Specialist Bereavement Midwife.  
[Christie-Ann.Lang@wales.nhs.uk](mailto:Christie-Ann.Lang@wales.nhs.uk). Telephone 0776646896.  
 Antenatal Clinic. Singleton Hospital. Sketty Lane. SA2 8QA.



## Notification to General Practitioner/Health Visitor

Please send this form to the GP and Health Visitor (if applicable) to inform of late miscarriage, medical termination of pregnancy for fetal anomaly, Intrauterine Death, Still Birth or Neonatal Death.

Affix Addressograph of Patient or insert details:

Hospital Number

Name

Address

Date of Birth

General Practitioner ☐

Health Visitor ☐

The above patient has experienced:

A Late Miscarriage	
Medical Termination for Fetal Abnormality	
Intrauterine Death	
Stillbirth	
Neonatal Death	

The above occurred at ..... weeks gestation

Named Consultant	
Date of Admission	
Date of Discharge	
Ward where care provided	
Relevant Medical Clinical History	
Name of Discharging Midwife/Nurse/Doctor	
Signature	
Date	



## Notification to Ante Natal Clinic

Please send this form Ante Natal Clinic (if applicable) to inform of late miscarriage, medical termination of pregnancy for fetal anomaly, Intrauterine Death, Still Birth or Neonatal Death.

Affix Addressograph of Patient or insert details:

Hospital Number

Name

Address

The above patient has experienced:

A Late Miscarriage	
Medical Termination for Fetal Abnormality	
Intrauterine Death	
Stillbirth	
Neonatal Death	

The above occurred at ..... weeks gestation

Named Consultant	
Date of Admission	
Date of Discharge	
Ward where care provided	
Relevant Medical Clinical History	
Name of Discharging Midwife/Nurse/Doctor	
Signature	
Date	





## **Babies Book of Remembrance**

**I wish to enter my child's name into the Babies Book of Remembrance at Singleton Hospital:**

Name of Baby	
Date of Birth	
Date of Death	
Names of Parents	
Name of Any Siblings	
Message or Verse of your Choice to be included	

Please return to:

Christie-Ann Lang, Specialist Bereavement Midwife, Antenatal Clinic, Singleton Hospital, Sketty Lane, SA2 8QA



## **Post Natal Discharge Records**



Addressograph

**Community Team:** \_\_\_\_\_ **Contact Number** \_\_\_\_\_

**Named Midwife:** \_\_\_\_\_ **Contact Number** \_\_\_\_\_

**Labour Ward: 01792 530862**

**Specialist Bereavement Midwife: Christie-Ann Lang**

**Contact Number: 07766466896**



Mothers Name..... Father/Partners Name .....

Gravida ..... Parity..... Blood Group..... Rhesus Status .....

Anti D Required: Y/N. Anti D Administered Y/N. Date Administered .....

Carbagoline Offered to suppress Lactation Y/N. Carbagoline Administered Y/N

Date of Birth..... Time of Birth.....

Delivery Type: NVD/Ventouse/Forceps/C-Section. MBL:.....

Perineum: Intact/1<sup>st</sup> Degree/2<sup>nd</sup> Degree/3<sup>rd</sup> Degree. Perineum Sutured: Y/N

Post Mortem Accepted/Declined. Memory Box Provided: Y/N

Photographs/Handprints Given to Parents/Kept in Notes

Gestation at Birth.....

Sex of Baby ..... Baby's Weight .....

Baby's Name .....

Discharge Medication:

.....

.....

.....

.....

Further relevant information:

.....

.....

.....

.....





[illegible]

### *Support Available*

**Swansea Bay Baby Loss Support Group** - A local support group for anyone who has experienced a pregnancy loss, death of a child or requires support during subsequent pregnancies. A safe and confidential space to meet other parents and support one another the closed group on Facebook: Swansea Bay Baby Loss Support Group.

Christie-Ann Lang: Telephone/Text 07766466896. Email: [Christie-Ann.Lang@wales.nhs.uk](mailto:Christie-Ann.Lang@wales.nhs.uk)

**Swansea Bay Care After Death Centre** – The care after death centre team can offer support and guidance following a bereavement. Morriston 01792 703114 Singleton 01792 285818 or email the team on [SBU.CADC@wales.nhs.uk](mailto:SBU.CADC@wales.nhs.uk)

**ARC (Antenatal Results & Choices** – Support for parents whose baby is diagnosed with a fetal abnormality in pregnancy. Helpline- 0845 077 2290 or 02077237486. [www.arc-uk.org](http://www.arc-uk.org)

**MIND** – Promoting and Supporting people with mental health problems.

Freephone – 0161 272 8205. [www.mind.org.uk](http://www.mind.org.uk)

**Bliss- for babies born sick or premature** – Family support helpline offering guidance and support for premature and sick babies. Helpline – 0808 802 0322. [www.bliss.org.uk](http://www.bliss.org.uk)

**Samaritans** - Confidential, emotional support in times of despair. Telephone 116 123

[www.samaritans.org](http://www.samaritans.org)

**SANDS – Stillbirth and Neonatal Death Charity** – Support for families affected by the death of a baby before, during or shortly after birth. Telephone 0207 436 5881. [www.uk-sands.org](http://www.uk-sands.org)

**Child Death Helpline** – For all those affected by the death of a child.

Freephone – 0800 282 986/0808 80 6019. [www.childdeathhelpline.org.uk](http://www.childdeathhelpline.org.uk)

**Cruse Bereavement Care** – For adults and children who are grieving. Telephone 0808 808 1677

[www.cruse.org.uk/bereavement-services](http://www.cruse.org.uk/bereavement-services)

**Contact a Family** – Support and information about specific conditions. Telephone 0808 808 355

[www.cafamiy.org.uk](http://www.cafamiy.org.uk)

**4 Louis** - 4Louis is a UK charity that works across the country to support anyone affected by miscarriage, stillbirth and the death of a baby or child. [www.4louis.co.uk](http://www.4louis.co.uk)

**Daddies with Angels** – Advice and support to male family members following the loss of a child/children. Telephone 07513 655134. [www.daddyswithangels.org](http://www.daddyswithangels.org)



**TAMBA –Twins & Multiple Birth Association -** Bereavement and special needs support groups.

Telephone – 01252 332344. [www.tamba.org.uk/bereavement](http://www.tamba.org.uk/bereavement)

**The Miscarriage Association –** Support for parents who have experienced miscarriage.

Telephone 01924 200 799. [www.miscarriageassociation.org.uk](http://www.miscarriageassociation.org.uk)

**2 Wish Upon a Star -** a local charity who aims to support all those affected by a sudden and traumatic death of a child or young adult under the age of 25 throughout Wales. Ensuring they receive the important support they deserve.

Telephone 01443 863125. Email – [info@2wishuponastar.org](mailto:info@2wishuponastar.org)

**Tommys –** The largest charity in the UK carrying out research into the causes of miscarriage, stillbirth and premature birth. Bereavement trained midwives available Monday to Friday 9am to 5pm. Helpline – 0800 0147 800. [www.tommys.org.uk](http://www.tommys.org.uk)

**The Key Hope Centre –** Local Support for pre/post termination of pregnancy, miscarriage and stillbirth. Telephone 01792 773800. Email- [Info.Keyhope@btconnect.com](mailto:Info.Keyhope@btconnect.com)

**The Lullaby Trust –** Raises awareness of sudden infant death syndrome (SIDS), provides expert advice on safer sleep for babies and offers emotional support for bereaved families. Bereavement Support: 0808 802 6868.

Email. [Support@lullabytrust.org.uk](mailto:Support@lullabytrust.org.uk). [www.lullabytrust.org.uk](http://www.lullabytrust.org.uk)

**Winston's Wish –** Supporting children and young people after the death of a parent or sibling.

Freephone – 08088 020 021. Online chat available via website Tuesdays 1-5pm and Fridays 9.30-1pm. [www.winstonswish.org](http://www.winstonswish.org)

**TFMR Mamas –** Termination for Medical Reasons Mamas offers support Groups and resources to help parents feel supported and not alone. [www.tmrmmamas.com](http://www.tmrmmamas.com)

