

Aneurin Bevan University Health Board

Guideline for taking a baby home following perinatal loss

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Policy on a Page: Key Messages

Aim:

This document has been developed to promote safe and effective practice to clinicians working within maternity services and looking after bereaved families who wish to take their baby home after death.

Summary of key changes (for revised documents only)

- Guideline updated to align with contemporary practice in the context of taking a baby home following a perinatal loss.

Key Requirements:

- Offer parents the option to take their baby home and support their wishes.
- Discussions to be clearly documented via the Badgernet system.
- Provide clear, sensitive information about changes and caring for their baby at home.
- Inform: Bereavement midwife, community midwife, mortuary, GP/health visitor.
- Ensure safe, dignified transport (no public transport).
- Provide advice and support with regards to how to care for baby at home.

Target Audience:

This guideline applies to all members of staff working within the maternity services.

Training:

Staff are expected to access appropriate training where provided. Training needs will be identified through appraisal and clinical/educational supervision.

Contents

1. Introduction/Overview	4
2. Scope	4
3. Statement/Background	4
4. Aim	5
5. Main Body	5
Care in Hospital	5
Parental Choices	5
Respect and Dignity	6
Communication	6
Who should be Informed?	6
Transportation of Baby	7
Care of Baby at Home	7
6. Roles and Responsibilities	8
7. Consultation	8
8. Equality Impact Assessment	9
9. Training Requirements	9
10. Audit and Review	9
11. References	9
12. Appendices	11
Appendix 1: Advice and guidance for parents wishing to take their deceased baby home patient information	11
Appendix 2: Setting up the cuddle cot at home: Parent Guidance	13
Appendix 3: Parent Transport Letter	17

1. Introduction/Overview

Sometimes a family whose baby has died in the perinatal period may wish to take their baby home. This guideline has been developed to support all staff caring for bereaved families and to provide consistent information and guidance to ensure that all care given is standardised and of a high quality.

Taking their baby home will give parents the opportunity to spend more time with them to make memories and allow other family members to meet their baby.

This document has been developed to promote safe and effective practice to clinicians working within maternity services and looking after bereaved families who wish to take their baby home after death.

2. Scope

This guideline applies to all members of staff working within the maternity services.

3. Statement/Background

If you have difficulty understanding any part of this guideline- including due to learning, sensory, or communication needs- please speak with your Line Manager or contact the authors of this guideline for support or clarification.

Staff must take a proactive approach to identifying and meeting the accessibility and communication needs of people with disabilities and/or language barriers, including offering information in alternative formats, arranging interpretation or communication support as required, and not relying solely on individuals to request adjustments.

The term “woman/ women” will be used throughout this document however, it is recognised that this refers to all pregnant, birthing and postnatal people regardless of gender identification.

Staff must take a proactive approach to identifying and meeting the accessibility and communication needs of people with disabilities and/or language barriers, including offering information in alternative formats, arranging interpretation or communication support as required, and not relying solely on individuals to request adjustments.

4. Aim

This guideline aims to-

- To ensure families are aware of all the choices available to them.
- To provide all documentation necessary for discharge to the community.
- To support the provision of consistent communication with all the relevant health care professionals in the hospital and community.
- To ensure advice is given to parents for transportation of their baby to their home.
- To empower families to care for their baby at home.

5. Main Body

Care in Hospital

Parental Choices

- All families should be offered the opportunity to take their baby home after birth.
- If a family wishes to have a post-mortem, they should be advised to return with their baby after 24-hours, as the value of any tests for the baby may lessen over time. There is still an opportunity for families to have their baby at home following the post-mortem.
- Legally, there is no reason why parents cannot take their baby home after they have died, apart from when a death has been referred to the

coroner. In these cases, the coroner will need to be contacted if the parents are requesting to take their baby home. Any discussions such as these must be documented via the electronic maternity system, Badgernet.

Respect and Dignity

- The family should be supported to make their decision, ensuring that they feel comfortable and confident in taking their baby home if they wish.
- Parents will need to be sensitively informed of the likely changes in their baby's physical condition over time, such as skin integrity, discolouration, odour and fluid leakage. Please refer to Appendix 1 '*Advice and guidance for parents wishing to take their deceased baby home patient information*'.
- Use factual and clear language, and be gentle during the explanation. If the parents are concerned, they should be encouraged to speak with their community midwife or the bereavement midwife.

Communication

- To ensure continuity of care and support is provided, concise information must be cascaded by all health care professionals.
- There is no requirement to contact the police to advise them of when a family wish to take their baby home after they have died.

Who should be Informed?

The following individuals need to be informed when a family decide to take their baby home-

- **Bereavement Midwife:** Please inform the bereavement midwife via email or telephone if a family is taking their baby home. The

bereavement midwife can help with notifying the right individuals. They will also act as the point of contact for the family when they go home.

- **Mortuary Staff:** Staff should attend the mortuary and complete the mortuary register with the details of mother and baby, contact details, date of birth etcetera.
- **Community Midwives:** The community midwife will visit the woman as normal to provide support and to confirm the wellbeing of the parents and family. The frequency of the visits can be agreed between the community midwife and the parents.
- **GP and Health Visitor.**

Transportation of Baby

- Appropriate advice should be provided to the parents to ensure that their baby is transported in a safe and dignified manner.
- Parents can use their own transport and travel straight from the hospital.
- Although it is not a legal requirement, the use of safety seats and seat belts are recommended to ensure that the baby is secure during the journey.
- If the parents wish to use transport such as a taxi, they should be advised to contact the taxi service and discuss this with them first.
- Public transport is not recommended.
- A member of staff will accompany the parents and their baby to their car on discharge. Staff corridors and lifts can be used if the parents wish for this.

Care of Baby at Home

- Parents should keep their baby cool at home, utilising the cold cot/cuddle cot as much as possible. Please refer to Appendix 2 '*Setting up the cuddle cot at home: Parent Guidance*'.

- In warm weather conditions, such as in the summer, parents should be advised to not have all windows open, as this may advance changes in their baby's physical condition.
- Parents can care for and hold their baby as they wish, this includes bathing and dressing. However, parents should be advised that over-handling may increase the rate of deterioration in their baby's physical condition.
- The community midwife and the bereavement midwife must be made aware of the arrangements in place, so that they can provide extra support if required and arrange for the return of the cold cot/ cuddle cot to the hospital when it is no longer required.
- When parents feel ready to say goodbye to their baby, or if they decide that having their baby at home is no longer right for them, they should be advised to contact their chosen funeral director to arrange for their baby to be collected.
- Parents need to be made aware that they can continue to visit their baby at the funeral home until the day of the funeral.

6. Roles and Responsibilities

It is the responsibility of the maternity team to ensure that this guideline is adhered to when providing care to bereaved families in the postnatal period.

7. Consultation

All new or significantly revised policies will be subject to consultation within the division via the Clinical Effectiveness Forum (CEF) and with relevant professional groups and/ or individuals present.

Individuals with expertise in obstetrics and midwifery have been consulted with in the development of this policy.

8. Equality Impact Assessment

An equality impact assessment has been carried out and approved as this guideline prioritises care based on standardised assessment and clinical need.

9. Training Requirements

Staff are expected to access appropriate training where provided. Training needs will be identified through appraisal and clinical/ educational supervision.

Mandatory annual training will include education for midwifery staff relating to bereavement care.

10. Audit and Review

This policy will be reviewed on a 3-yearly basis, unless significant changes to clinical practice/ national policy arise.

This guideline will be audited by the bereavement midwife, looking at these key points:

- Compliance with the documentation on the ABUHB Integrated Care Pathway for Pregnancy Loss over 20 Weeks.
- Compliance with the Communication checklist within this guideline.

11. References

Frimley Health NHS Foundation Trust (2019). *Taking a deceased baby home (at any gestation)*.

NHS Scotland (2017). *Collaborative guidance for the staff to support families who wish to take their baby home after death* [Online]. Available

at:

[https://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKewjDnuiWkruUAxX7QkEAHZvfHqIQFnoECBqQAQ&url=https%3A%2F%2Fwww.widgetlibrary.knowledge.scot.nhs.uk%2Fmedia%2FWidgetFiles%2F1014174%2FCollaborative%2520guidance%2520for%2520staff%2520to%2520support%2520families%2520who%2520wish%2520to%2520take%2520their%2520child%2520home%2520after%2520death%2520\(FINAL\).docx&usq=AOvVaw0_5jKu9ecKK1bo96ReFN4r&opi=89978449](https://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKewjDnuiWkruUAxX7QkEAHZvfHqIQFnoECBqQAQ&url=https%3A%2F%2Fwww.widgetlibrary.knowledge.scot.nhs.uk%2Fmedia%2FWidgetFiles%2F1014174%2FCollaborative%2520guidance%2520for%2520staff%2520to%2520support%2520families%2520who%2520wish%2520to%2520take%2520their%2520child%2520home%2520after%2520death%2520(FINAL).docx&usq=AOvVaw0_5jKu9ecKK1bo96ReFN4r&opi=89978449)

(Accessed 15/05/2026).

Sands (2014). *Sands Position Statement Taking the Baby Home* [Online].

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<https://www.sands.org.uk/sites/default/files/Sands%20position%20statement%20Taking%20the%20baby%20home%202015.pdf>

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15/05/2026).

Sands (2017). *National Bereavement Care Pathway* [Online]. Available at:

<https://www.sands.org.uk/professionals/national-bereavement-care-pathway> (Accessed 15/05/20

12. Appendices

Appendix 1: Advice and guidance for parents wishing to take their deceased baby home patient information



Advice and guidance for parents wishing to take their deceased baby home.

The loss of a baby is one of the most traumatic and emotionally distressing times of your lives. It is natural to be experiencing a mixture of feelings from shock to disbelief, making it hard to concentrate on all the information you are being given by the midwives and staff on the labour ward. This leaflet has been developed to clarify some of the practical advice you may need, if you have decided you wish to take your baby home. It is important that you feel supported at this time and know who to contact should you require any additional support. The guidance will also provide you with advice on caring for your baby. It will include information about who to contact if you have any concerns at home and details of what to do when you decide you are ready to say goodbye.

Transporting your baby home.

1. It would be advisable to ask someone to drive you all home as you may find it difficult to concentrate on driving while experiencing such raw emotions. Ask them to meet you as close to the main entrance as possible.
2. You can carry your baby to the car in your arms or a Moses basket (we can provide one if necessary) and a member of staff will accompany you to the car.
3. The baby should ideally be secured in a car seat or approved baby transport device.
4. You will be given a copy of the parent transport letter to take with you. This can be presented if you should be stopped on your way home from the hospital or if you are involved in an accident.

What to expect when you get home.

The condition of your baby will change over time. These expected physical changes may be:

1. Changing colour or peeling of the skin
2. Slight oozing of bodily fluids or odour
3. Temporary stiffness
4. Coolness of the skin

There are some things you can do at home to slow down these changes. These include:

1. Keeping your baby cool by using the cold cot as much as possible.
2. Keeping windows closed especially in hot weather.
3. Keep pets out of the room.
4. Using a cuddle cot (which we can provide for you if available).

You may bathe, dress, and hold your baby as you wish. Ideally, the baby should be kept cool as much as possible. You should contact your preferred funeral director once at home and make arrangements for them to collect your baby when you feel the time is right.

You will need to register your baby's birth (if over 24 weeks) and Torfaen Registry office will contact you directly to arrange this.

Changing your mind

We recognise that sometimes circumstances and feelings change, and you may decide that having your baby at home is no longer the right thing for you. If this happens it is important to contact your funeral directors and ask them to come and collect your baby. You will still be able to visit your baby at the funeral home until the funeral. If you have decided to have a post-mortem, then arrangements should be made for your baby to be returned to the hospital. A time and a place for this must be arranged between you and the bereavement midwife. If you have any concerns or questions, please use the contact numbers on the parent transport letter.

Appendix 2: Setting up the cuddle cot at home: Parent Guidance



Setting up the cuddle cot at home: Parent Guidance

The cuddle cot is a cooling system which will keep your baby at the correct temperature allowing you to spend more time together at home.

We will fill the cooling unit ready for you to use but there are the instructions in case your baby is at home for a longer time.

Contents:

Cuddle cot storage box

Cuddle cot unit

Hose with connector

Cooling mat

Insulating silver foil sheet

Bottle of biocide

Bottle of sterile water

Key to empty water

How to set up the cuddle cot

1. Place the silver insulation foil on top of the surface being used for e.g., cot, mattress, or pram with the **shiny side upwards**.



2. Place the cooling mat onto the silver insulation foil and cover with a sheet. Ensure the tubing hangs over the side of your Moses basket or cot and is kink free.



3. Plug the cooling unit in and attach the hose to the cooling unit (you will hear a click)



4. Plug the cooling pad connectors into the end of the hose. You should hear a click.



1. Open the filler cap and fill the unit with water until 2/3rds full of STERILE water. Add two drops of biocide. The water tank will need to be topped up periodically so it does not run out (an alarm will sound if the water level drops).



7. Switch the cooling unit on by pressing the on/off button.
Press the down arrow until it shows 8 degrees and then press enter.

(The unit takes about 45mins to become cool)



8. The cuddle cot is now working.

Your community midwife will liaise with the bereavement midwife at the hospital to arrange for the cold cot to be returned.

Appendix 3: Parent Transport Letter



Parent transport letter.

TO WHOM IT MAY CONCERN:

This letter is to confirm that (mother's name)
.....

Of (home address)
.....

whose baby was stillborn/died on (date).....

are taking their deceased baby home from

Grange University Hospital,

Llanfrechfa,

Cwmbran.

NP44 8YN

On (date).....

They will be (delete as appropriate)

- contacting their funeral director to arrange collection of the baby and make their own funeral arrangements.

Or

- bringing their baby back to the hospital (for post-mortem) on:

Name of authorising member of staff

Job title.....

Signature.....

Date.....

If further confirmation is needed, please contact the Labour Ward Coordinator at

The Grange University Hospital 01633493181 (24 hours)

Or the Bereavement Midwife during office hours on 07581022493