Postpartum Support Plan

Plan for expected loss

A Postpartum Plan is much like a Birth Plan. It is meant to help consider what life may look like and prepare ahead of time. Bear in mind that flexibility is the key when considering all the potential conditions that are unknown. You may not look at this postpartum plan but the process of creating it, processing, conversation, and intention during pregnancy is part of the prevention.

Remember to honor this time as you heal, physically and emotionally. Consider what is important individually and as a family.

Your Hospital Stay

Contact Info

Hospital: _____

Midwife: _____

OBGYN: _____

Doula: _____

Birth Plan

- ❏ Create a birth plan with your partner or doula- https://www.perinatalhospice.org/sample-birth-plans
- ❏ Leave the hospital with Birth & Death Certificate in hand

Funeral & Memorial Services

Funeral Home

Name: _____

Address: _____

Phone Number: _____

Pahiki Caskets- No cost for children. https://www.pahikicaskets.com/our-keiki-fund

Additional Notes:

Memory Making

Examples: Photographs (Now I lay Me down to Sleep), Hand and Foot Molds, Footprint in Bible or child books, Breastmilk keepsakes, Placenta prints, Molly bear, Reborn doll, Comfort cub, Heartbeat stuffie

Meals

We Plan to:

- ❏ Have meals prepared ahead of time and stored in the freezer
- ❏ Prepare meals day to day ourselves
- ❏ Prepare meals day to day with help
- ❏ Have a Meal Train set up
    - ❏ Link: _____
- ❏ Order in _____ times a week

Favorite Restaurants/Delivery:

- _____
  _____

Grocery Stores that Deliver

- _____
  _____

Prepared Meal Services that Deliver-

- Good Clean Food Hawaii
- Malama Meals

_____
_____

Who will primarily do the cooking?

- ❏ _____

What are some easy, favored family meals?

- ❏ _____
  _____

Places in the area that deliver food we like?

- ❏ _____
  _____

ALLERGIES

_____
_____

Additional Notes:

Mental & Emotional Healing

Anxiety and/or depression are the most common complications of childbirth and pregnancy. These illnesses – known as perinatal mood and anxiety disorders -- affect up to 1 in 5 women during pregnancy or the first year after giving birth. Fortunately, these illnesses are temporary and respond well to treatment, which often includes self-care, social support, talk therapy, and medication when needed.

Maternal Mental Health Therapist
Nurture Mental Health- 808-320-4186

Postpartum Support International- Information, resources, local volunteer support coordinator and free online support groups.

Code Word: A word (or phrase) you agree upon with your partner to indicate that you're feeling overwhelmed and need support or space

_____

Are there any other signs that others may see in you that would indicate that you are in need of additional support such as professional therapy, emergency services, etc.? For example, isolating, rapid talking, reduced or excessive need for sleep, loss of or excessive appetite, hopelessness comments, etc.

_____

Activities and 'breathers' for mothers rest, renewal, and re-energizing and self care:
Meditation, Exercise, Music, Baths, Walks, Crafts, Sports Reading, Beach, Journal

_____

Activities and 'breathers' for partners rest, renewal, and re-energizing and self care:
Meditation, Exercise, Music, Baths, Walks, Crafts, Sports Reading, Beach, Journal

_____

Sleep
What are your normal (pre-pregnancy) sleep requirements (# of hours per night)?

-

Sleep not only benefits our physical health and well being, it can also have a significant impact on mental health, including increasing risk for anxiety and depression. Most adults need approximately 7-9 hours of sleep in a 24 hour period. In addition, it is important to have at least one 3-4 hour uninterrupted sleep period to ensure REM and deep sleep which are vital for your immune system functions, energy, repair, learning, and memory. Sleep hygiene tips- https://www.sleepfoundation.org/articles/sleep-hygiene

Support

This is the reminder that you have the right to set boundaries around visitation. Some families want all the visitors right away, some want time to bond as a family unit. Decide and communicate this ahead of time.

Another consideration is ‘What am I in control of? What can others do for me?’

- ❏ People to reach in a moment of emotional stress
  Day: _____
  Night: _____

- ❏ I would like to consider specific hours for guests to visit.

We expect to have the following people as visitors:

- ❏
- ❏
- ❏

We anticipate wanting many / few visitors

- ❏ We would like to keep distance from specific friends and family:
  - ❏
  - ❏
  - ❏

Who would you most like ‘checking in’ on you? How can they support you?

- ❏ Phone Call
- ❏ Text
- ❏ Personal Visit
- ❏ Food Delivery
- ❏ Children
- ❏ Pets
- ❏ General Home Chores
  - Laundry
  - Dishes
  - Housekeeping
  - Yardwork

Support Groups we may want to consider

- Mali Bella
- Compassionate Friends
- Star Legacy
- Now I Lay Me Down to Sleep
- MEND
- Bereaved Parents USA
- Let Grace In

Pre Written Texts

- Thank you for reaching out, I would appreciate a visitor today
- Thank you for reaching out, I would appreciate a visitor today but not talk about my birth
- Thank you for reaching out, I need a little quiet time today and would appreciate you checking in tomorrow
- Thank you for reaching out, would you be willing to help with the house/pets today
- Thank you for reaching out, I would love to talk but not right now. I will be in touch when I'm ready.
- Thank you for offering to help. This is the link to our meal train which also offers gift cards and delivery services for people who live far away:

Relationships

Something that will help you feel connected/seen by your partner in the midst of a lot of change.

It is important to our relationship that we:

_____
_____
_____

It is important to maintain the following with our children:

_____
_____
_____

Activities and 'breathers' for connecting as a couple:

_____
_____
_____

Our greatest concerns are:

_____
_____
_____

Other things that are important to us:

_____
_____
_____

Physical Healing

What is important to you when determining how you expect to physically recover from the birth? *(Self-care, exercise, weight, etc)* How will these be achieved?

Lactation

I would like information on:

- ❏ Drying up my breastmilk as quickly as possible
- ❏ Donating my breastmilk

Lactation Consultant
Name: _____
Phone: _____
Email: _____

Pelvic Floor Therapist
Name: _____
Phone: _____
Email: _____

Belly Binding
Name: _____
Phone: _____
Email: _____

Returning to Daily Routines

When do you expect to return to work? _____
When does your partner expect to return to work? _____
Who generally does the household chores and how might this change during your recovery-

- Cleaning _____
- Laundry _____
- Cooking _____
- Grocery management _____

As the mother I will expect my partners role to be

_____
_____

As the partner I will expect the mother's role to be

_____
_____

Children

- ❏ I have talked with my children about what to expect during labor and delivery and postpartum
- ❏ I have a plan on contacting family members after birth
- ❏ I have plans for where my children will go when I am in labor
- ❏ I have plans for how my children will arrive to the hospital
- ❏ I have additional things that will need care while I am in labor:

_____

_____

Mental & Emotional Support for Children

_____

_____

The following people have offered to help with our children

Morning Care
- Name:
- Phone:

Afternoon Care
- Name:
- Phone:

Evening Care
- Name:
- Phone:

Morning School Dropoff
- Name:
- Phone:

After School Pickup
- Name:
- Phone:

Activity Transportation
- Name:
- Phone:

Help with homework
- Name:
- Phone:

Playdates
- Name:
- Phone:

Sleepovers
- Name:
- Phone:

Favorite Activities our Children Enjoy

Favorite Snacks/Meals

Favorite Shows/Movies

Daily Schedule:

Pets

Veterinarian Information

- Name: _____
- Address: _____
- Phone: _____

The following people have offered to help with our pets

- *Name & Phone:* _____

General Information

- Pet Name(s)*:* _____
- Feeding Routine*:* _____
- Bathroom Routine*:* _____
- Walk/Play Routine*:* _____

Additional Notes: