

Sands position statement Storing keepsakes in hospitals

The parents of babies who die before, during or shortly after birth are likely to have few or no memories or tangible keepsakes of their baby.

Keepsakes such as photos, hand and footprints, identity bracelets, cot tags, certificates or a lock of the baby's hair may be comforting to families in the months and years to come.

It is therefore essential that hospital staff offer parents opportunities to create memories and keepsakes and support parents to do so if necessary.

Most parents want to take these keepsakes home with them. Other parents may agree to having photos or hand and footprints taken but they may not feel able to see them or take them home.

Many hospitals have stored these items in the mother's medical notes. However, this may no longer be possible with the increasing use of paperless notes. In these instances, Sands recommends placing the items in a sealed envelope which the parents can take home and store themselves or give to a trusted person for safe keeping.

If this is done, Sands recommends that it is recorded in the mother's medical notes.

Some hospitals are in the process of digitising electronic notes and are no longer able to store hard copy keepsakes that were created previously. In the interest of transparency and offering parents choice, Sands suggests that hospitals write to the parents involved to ask whether parents would like their keepsakes to be sent to them. In this correspondence, they should give parents the option of responding to the hospital via email, phone or by letter to make it as easy for them as possible.

Hospitals should also explain that if parents want their keepsakes to be sent to them, they will be placed inside a sealed envelope marked 'Photographs' or 'Keepsakes.' This envelope will then be inserted into another envelope so parents can choose if and when they wish to see the keepsakes.

These keepsakes should be sent to parents using a 'signed for' postal service to ensure safe delivery. In the initial letter, hospitals should also add that if they don't hear from parents, their keepsakes will be stored for the foreseeable future in case parents wish to have them sent later. Sands would also suggest that hospitals acknowledge that receiving this letter may be distressing for some parents and provide details of the support offered by Sands in the letter.

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Improving bereavement care team