**Background**

At Private Midwives, we fully support home birth as a safe option for a positive physiological birth experience.

Our midwives are highly skilled and experienced in providing home birth care. Our latest data shows that 76% of first time mums (or those with a previous caesarean) and 87% of mums who had a vaginal birth before, who planned a home birth with our care, had the home birth they had hoped for.

All of our policies and guidelines are designed with the safety of you and your baby in mind and your midwife will gladly share any of these with you.

We know that your birth experience is very important to you. We are aware that you are investing a lot of emotional energy and finances in our care and we want to be fair to you and set out at the start how we work. This is so we can both determine if working together is right for you, right for the midwife and right for our organisation.

**VBAC**

If you have had a caesarean section previously and now want to plan a home birth, we ask you to read our VBAC policy where a lot of information is provided. This is to enable you to make an informed decision. Ideally we would ask you to book a package of care that starts as early as possible and no later than 30 weeks of pregnancy unless there are exceptional circumstances.

**Medical conditions**

In most cases, we are happy to provide homebirth care to
women with medical conditions or other factors that may be classed as higher risk. For example, if you have Group B Streptococccous (GBS) we can care for you at home and teach you the observations to look for in baby afterwards (1)

If you have gestational diabetes, we are happy to work with you to stabilise your condition and to have a home birth (2)

If you have epilepsy and your condition is well controlled, we can care for you at home but we need to have specific discussions with you if you are planning to use a birthing pool - just so we can make plans to keep you safe.

We will do all we can to come up with a safe plan of care that you are happy with, that meets your birth preferences. Occasionally this may mean working with you to involve other health care professionals and of course we will discuss this with you.

**Collaboration with the NHS/HSE**

Ideally, we prefer all our clients to book in at the local hospital, just in case there is a problem and we need to access their expertise. However, we fully understand that some women do not want to book in to the NHS or HSE hospitals. This is totally your choice. However, not being on their system may compromise any care you need in an emergency. Our practice will be to tell the local hospital that we have a client booked in their area. If we have your consent we will share your details.

If you book one of our packages of care that starts later (for example the sapphire package starts at 34 weeks of pregnancy) it is important that you have accessed care prior to this package commencing. We are sorry but we cannot commence caring for you at 34 weeks of pregnancy

1) We cannot give IV antibiotics for GBS in the home

2) We cannot give home birth care to women on insulin or who need IV insulin in labour
if you have not had any care at all before hand.

**Your birth plan**

Your midwife will work with you to develop an individualised birth plan that outlines all of your needs and wishes. We fully support your individual right to make choices that are right for you.

The relationship between you and your midwife is unique and based on trust, understanding and collaboration. It is important to us that this relationship is right for both of you, and if for any reason you, or your midwife feel it is not right, we will do our best to find an alternative midwife for you (3).

Many of our clients choose to avoid vaginal examinations (VE). We fully understand this. A VE is used not simply to assess dilation of the cervix but also the position of the baby and if baby is moving downwards. There may be cases where recognising baby's head is not in an ideal position could enable your midwife to suggest new positions for you, or other measures to maximise your chance of a safe homebirth. Not having this piece of information may limit the support your midwife can offer you but we will of course respect your choice.

In order for us to share this wonderful journey with you, we ask you to agree to have periodic observations taken of your temperature, pulse and blood pressure - and baby's heart beat. This is to ensure that you and baby are coping well with labour and that we can support and advise you to achieve the homebirth you want. If your choice is to avoid all maternal and fetal monitoring and adopt a "free birth" approach, we fully respect this. However, this is not something that we can share with you and an alternative care provider may be more appropriate for you.

3) If your midwife can no longer care for you, or the relationship has broken down and we can not offer an alternative - you only pay for the care you have received.
**Scans and blood tests**

Some of our clients choose not to have scans or blood tests. Again this limits the information we have to advise and support you on how to achieve the best possible outcome. However, we respect your choice. Your midwife will work with you and the information available but sometimes this may mean that an unnecessary referral is made - just because a piece of information was not available.

If you are planning a home birth under our clinical care, we ask that at some point you have a blood test to check your blood group and antibodies. Also, you have a test for anaemia and platelets. If you want to avoid the hospital, your midwife can take these tests at home for you and they can be processed at a private lab for a small additional fee.

**Birthing partners**

We are very happy to work with your choices for whom you want present at your birth, as long as none of your chosen birth partners has signs of a contagious illness. We are used to working with children in the birthing room and we have a fabulous relationship with doulas and birth photographers.

**Transfer to hospital**

Your midwife will do all she can to help you to achieve the positive birth experience you want. Occasionally transfer to hospital is needed for the safety of you and/or baby and in these cases your midwife will arrange this.

We do understand that for some women, transfer to
hospital is frightening. Your midwife will help you to understand the reasons why it may be needed and she will take every possible step to avoid any transfer that isn't necessary. Occasionally, women tell us that they would not transfer to hospital no matter what the reason. If this is your belief, we respect that, but we would not be able to share your birth journey with you as this puts the midwife in an extremely difficult and vulnerable position. If this is your choice, another health care provider may be best for you.

**Your care package**

We know that the best possible outcomes are achieved when the midwife has time to build a trusting relationship with you, explore all of your preferences and can assist you to achieve the birth you want. This may involve some exercises to get baby into a good position, relaxation or hypnobirthing etc. We encourage all of our clients who want a home birth to book as much antenatal care within their package as possible.

We do not offer home birth care without some antenatal care. We also do not offer a service where the midwife will sit outside your home "just in case" whilst you free birth, or just come and deliver the placenta.

**Change of plan**

If you change your mind, or a problem develops prior to your midwife attending you in labour, meaning a home birth is no longer the safe options for you, you can change your plan of care. In these circumstances you only pay for the care you have received.

We are happy to arrange a free telephone consultation with
a midwife before you decide if we are the right organisation for you. We much prefer to have discussions at the start, rather than after care has started so please let us know if there is anything in your medical history or birth plan that could impact on our working together.

*We look forward to sharing this exciting journey with you.*

**Notes**

We are sorry but we can not care for women under 18yrs of age.

We may cancel your care if you are not honest with us about your medical conditions and circumstances.

If you have a medical condition or previous surgery where a home birth is contra-indicated, we may not be able to care for you. Please discuss this with us before you book care.

Not all of our midwives are comfortable to facilitate planned breech or twin homebirths. We will do all we can to find an experienced breech/twin practitioner if these circumstances apply to you.

Epidural and narcotic pain relief is only available for hospital births.

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