



University Hospitals Bristol **NHS**

NHS Foundation Trust

Patient Information Service
St Michael's Hospital

Choosing where to have your baby



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Your choices

Giving birth is generally very safe, and this leaflet provides information to help you choose the best place to have your baby. Your midwifery team will also help guide you to the most appropriate place for you to give birth, but ultimately it is your decision whether you give birth at home or in a local maternity unit.

There are a number of places to have your baby in the local area, and these are outlined in this leaflet. It is important that you discuss your individual circumstances with your midwife or obstetrician before you make your final choice.

It's important that wherever you choose to have your baby, it's somewhere you feel comfortable and relaxed. You do not have to make a final choice at the beginning of your pregnancy; you can change your mind between home birth and a hospital birth at any time, right up to when you are in labour. You can discuss this with your midwife throughout your pregnancy.

It is recommended that you choose to birth at home, a free standing midwifery unit or a co-located midwife led unit if you are healthy and have an uncomplicated pregnancy.

Women who give birth at home are more likely to successfully breastfeed their babies.

Home birth

Home is often the best place for healthy women with uncomplicated pregnancies to give birth. You just need a warm house and a telephone.

If you are choosing a home birth, one of your midwifery team will visit you in the final month of your pregnancy to discuss your plans for birth, and to make sure it is still the right choice

for you. She will discuss the things you need to provide such as a plastic sheet and old towels. All equipment is brought to your home by the midwife and removed after your baby is born.

When you are in labour, care will be provided by a midwife, and another midwife will be called for support when required.

If a problem arises during labour or soon afterwards, with either you or your baby, the midwife will discuss the need to transfer you to hospital; this will be done by ambulance and the midwife will accompany you.

There are many types of pain relief available to you at home. Evidence shows that women who choose to have their baby at home are more likely to cope with non-drug types of pain relief such as:

- Baths / birthing pool
- Massage
- TENS (transcutaneous electrical nerve stimulation)
- Hypnosis techniques such as hypnobirthing or natal hypnotherapy
- Aromatherapy.

Your midwife will arrange for entonox (gas and air) to be available at home for you.

Labouring in your own home means you are more likely to be relaxed and can have as many birth partners with you as you like. You can also eat and drink things that you would normally have at home.

If this is your first baby, you are more likely to have a normal

birth if you labour at home than in hospital. If you have had a baby before, giving birth at home significantly reduces the chance of needing a caesarean section in labour, a forceps or ventouse birth, or an episiotomy (a cut to help the baby be born).

Overall, less than one in every 100 babies born at home will require any extra care such as admission to a neonatal unit.

Evidence shows that out of every one thousand women who give birth to their first baby at home, around four more babies will require some form of extra care than for those born in hospital (around nine babies at home, as opposed to around five babies in hospital). If it is a second or subsequent pregnancy, there is no statistical difference in extra care required for babies whether they are born at home or in hospital.

When a woman labours at home with her first baby, between four and five out of every 10 women will require or choose to transfer to hospital in labour or immediately after the birth. In a second or subsequent pregnancy, this is about one in every 10 women.

Freestanding midwifery units

The Ashcombe Birth Centre at Weston, Cossham Birth Centre in Kingswood Bristol, and the Paulton maternity unit are freestanding midwife-led units.

You do not have to live in the Weston, Bristol or Paulton area to use these units. Your midwife can give you more information about these units. You can also contact midwives at the unit directly to arrange to look around or to ask about the services provided.

Women who plan to give birth in a freestanding midwife-led unit have significantly fewer interventions and a better chance

of normal birth than women who choose to labour in an obstetric unit.

If you choose to give birth in a midwifery unit there is no difference in the number of babies needing extra care (such as admission to a neonatal unit) compared to babies born in hospital.

Midwifery units are staffed by midwives and midwifery assistants, and do not have obstetric doctors or anaesthetists available.

If you labour at a freestanding midwifery unit and need to transfer to a consultant unit there will be a time delay. In most cases the reason for transfer is not urgent, and the time delay does not affect the outcome for you or your baby.

Co-located midwife-led unit

Bristol has two co-located midwife-led units:

- St. Michael's Hospital
- Southmead Hospital on the same level as central delivery suite.

These units are run by midwives and have the same facilities as free standing units but are located within a main obstetric unit offering rapid transfer to full obstetric and neonatal care if required rather than an external transfer.

Birthing pools

Women who labour while immersed in water require less drugs for pain relief, and are more likely to have a quicker labour. Birthing pools are available at Ashcombe Birth Centre, the

midwifery-led unit and central delivery suite at St Michael's Hospital, Cossham, Southmead, Bath, and the Paulton maternity unit.

Please ask your midwife for more information if this is something you wish to consider.

Consultant-led obstetric unit

If you have certain medical conditions, have had a previous complicated pregnancy, or a complication arises in this pregnancy, you will be advised to give birth in an obstetric unit.

These complications include (but are not limited to):

- high blood pressure
- diabetes
- epilepsy
- problems with the thyroid gland
- some infections which present a potential risk to the baby
- significantly raised body mass index (BMI)
- previous caesarean section
- serious complications in a previous birth
- twins
- a baby presenting by the breech (bottom-first)
- women who require caesarean section or induction of labour in this pregnancy.

Women without complications can also choose to give birth in an obstetric unit if they would like to.

Healthy women with an uncomplicated pregnancy who choose to give birth in an obstetric unit have a higher chance of having medical intervention and requiring epidural and other drugs for pain relief.

In an obstetric unit, care is given by a team of professionals including midwives, obstetric medical staff, anaesthetists, and neonatal doctors. They have extensive expertise in caring for women and babies who have problems during the pregnancy or develop them during labour or after the birth.

The obstetric units in the Bristol area are St Michael's Hospital and Southmead Hospital. Both units offer similar expertise.

As well as the types of pain relief available at home you can choose an epidural if you labour in an obstetric unit, and your midwifery team can give you information about this.

How to find out more:

- ask your midwife or obstetric doctor
- attend antenatal classes
- contact the National Childbirth Trust (telephone: 0870 444 8707)
- contact the Association for Improvements in the Maternity Services (AIMS: www.aims.org.uk)
- visit the NHS choices website (www.nhs.uk)
- visit the MIDIRS infochoice website (www.infochoice.org).

Speaking to a supervisor of midwives (SOM)

If you have any questions regarding the advice or information

you have been given, or would like to talk about your options for your birth you can contact a SOM. Supervisors are able to give you further information and support you in your choice and maintain the safety of you and your baby.

You can contact a SOM by:

- Asking any member of staff at any time
- To find a SOM in the hospital, contact switchboard on 0117 923 0000 or telephone the community office on 0117 342 5241 between 10am and 12 midday and 2pm to 5pm weekdays weekends, and Bank holidays 1pm to 5pm.

Contacting the units:

Ashcombe Birth Centre

Weston-Super-Mare

01934 647 082

St Michael's Hospital

Southwell Street, Bristol

To book a tour:

0117 342 5241

(please do not ring the
midwife-led unit to book a tour)

Central delivery suite:

0117 342 5213

Midwife-led unit:

0117 342 1807

Southmead Hospital

Westbury-on-Trym, Bristol

Central delivery suite:

0117 323 5320

Midwife-led unit:

0117 323 6200

Cossham Birth Centre

Midwife-led unit:

0117 323 5319

Royal United Hospital

Princess Anne Wing, Combe Park, Bath

Central delivery suite:

01225 824 847

Paulton maternity unit

01761 412 107

Please note that if for any reason you would value a second opinion concerning your diagnosis or treatment, you are entirely within your rights to request this.

The first step would usually be to discuss this with the doctor or other lead clinician who is responsible for your care.

Smoking is the primary cause of preventable illness and premature death. For support in stopping smoking contact **Smokefree Bristol** on **0117 922 2255**.

As well as providing clinical care, our Trust has an important role in research. This allows us to discover new and improved ways of treating patients.

While under our care, you may be invited to take part in research. To find out more please visit:
www.uhbristol.nhs.uk/research-innovation
or call the research and innovation team on
0117 342 0233.

For access to other patient leaflets and information please go to the following address:

www.uhbristol.nhs.uk/patients-and-visitors/information-for-patients/

Hospital Switchboard: 0117 923 0000



Minicom: 0117 934 9869



www.uhbristol.nhs.uk



For an Interpreter or Signer please contact the telephone number on your appointment letter.



For this leaflet in Large Print, Braille, Audio, or Email, please call the Patient Information Service:
0117 342 3728 / 3725

