



# **Choices in Maternity Care Including Place of Birth**



**Northampton  
General Hospital**  
NHS Trust

## Introduction

It's never too early to start considering the choices available to you as part of your maternity care. At no point do you have to make definite plans, and you can change your mind at any stage in your pregnancy. What we do know is that women who are given information about the choices available and are involved in their care are more likely to feel in control and have a more positive experience of birth.

## How do I receive antenatal care?

You can self-refer to the Northampton Pregnancy Referral Service on the Northampton Hospital Website, under Community Midwifery Services as soon as you confirm you are pregnant. Your midwifery care will take place at one of our Community Midwifery Hubs, (Far Cotton, Billing Road, Moulton and Daventry). The word midwife means 'with woman' and the relationship that you have with your midwife should be one of trust with good communication.

## Who provides my care?

### **Midwife led care**

The majority of women will only need to have a midwife caring for them throughout this important time as midwives are the experts in normal pregnancy, birth and the postnatal period. You can choose to see your GP during your pregnancy though this is not necessary if you do not have any medical problems. If at any time there are concerns about you or your baby, you will be advised by your midwife to see a doctor.

## **Consultant led Care**

Some women will need some specialist input from an obstetrician, this is a doctor who specialises in pregnancy and birth. Even if your pregnancy is straight forward you may choose to see an obstetrician-your midwife or GP can arrange this for you. If your care is with the obstetrician you will still have a named midwife.

## **Where can I be seen?**

Most women are seen by their midwife at the Community Midwife Hubs, but your midwife may offer to visit you at home at some point in your pregnancy.

## **Where can I have my baby?**

### **Birth at Home**

At home you are likely to feel more relaxed, have greater privacy and be free to move around, often resulting in a more efficient labour. It is also reported that women experience less pain, need less pain relief and are more likely to be satisfied with their experience of birth. If you do need pain relief you may consider options such as TENS, massage, relaxation and the use of water or any other non pharmacological pain relieving strategies that you have learnt. A midwife can also provide entonox (gas and air); If you choose a water birth at home, you will need to hire or buy your own pool and ensure that you have instructions as to how to safely fill it and dispose of the contents following the birth

A national study in 2011 (Birthplace – which recorded birth outcomes for more than 64,000 mothers and babies – the largest study of its kind in the world) found that low risk women planning a birth at home have significantly fewer interventions than

women giving birth in a consultant unit. This includes significantly reducing their chance of needing a caesarean section, forceps, ventouse (a suction cup), induction of labour and are less likely to experience a tear or cut to their perineum (area between the vagina and back passage)

For first time mothers the study showed that per 1000 births, 450 women required transfer to hospital and that there is a slight increase in the risk to their baby over choosing a hospital setting.

Women having their second or subsequent baby can significantly reduce their chance of having medical interventions without any change in the safety of the birth by choosing a home birth. This study showed that birth in England is very safe for women at low risk of complications, wherever that takes place.

Therefore, for many women, birth at home is a safe option and we can support women who choose to birth at home.

If complications arise during your pregnancy, a hospital birth may be advised. It is important to note that you can change your mind at any time, even during labour regarding your place of birth.

## **Birth at Hospital**

### **Consultant Unit (Sturtridge Ward)**

Some women feel more comfortable choosing to birth in hospital. For women with complications, hospital is the safest place to birth. Sturtridge ward is our consultant led labour ward, where women who have input from an obstetrician will be cared for. Care is still provided by midwives but can also be overseen by the obstetric team, which means that doctors are available should you need any extra assistance during labour or birth. You will be encouraged to be upright and move around during labour and a birthing pool

is available for pain relief. Your midwife can discuss the various options for pain relief available, including an epidural should you need one. If your baby is born early or needs any extra care after the birth the hospital has a special care baby unit, as well as paediatricians (doctors who specialise in the care of babies and children) who can provide the specialist care required. You may want to consider having two birthing partners with you, as there are lots of benefits to having good support during labour. You may wish to look at other maternity units in your area, as you have the choice as to where you have your baby. Where ever you choose to have your baby, we aim to give you a positive experience of birth, with high quality care.

### **Midwife Led Unit (Barratt Birth Centre)**

If you are midwife led throughout your pregnancy and no problems are anticipated, you will be offered the option of being cared for in our 'home from home' MLU, which is within our maternity unit. There is an assessment room and there are three ensuite rooms for women to give birth in. Each with a double bed, kitchen area and birthing pool as well as mood lighting. The emphasis is on providing a relaxed environment and supporting you to have an active labour and birth with minimum intervention.

The care is provided by a team of midwives. Pain relief options include use of water and entonox (gas and air). If you decide to have further pain relief or a situation arises where additional help is needed, you will be transferred to our consultant led labour ward.

Giving birth in a midwifery-led unit is particularly suitable if your pregnancy is low risk, because the rate of interventions is lower and the outcome for the baby is no different compared with an obstetric unit.

## **Birth After Caesarean (BAC)**

If you have had a caesarean section, it does not necessarily mean you will have to have a caesarean again in the future and most women can go on to have a vaginal birth.

When you and your doctor are discussing whether to plan a caesarean section or a vaginal birth, your doctor should take account of:

- Your preferences and priorities
- The risks and benefits of another caesarean section
- The risks and benefits of a vaginal birth after caesarean section

You will also be given the opportunity in the Birth After Caesarean (BAC) Clinic to discuss your previous birth, and plan together for the next.

## **What if I'm not supported in my choice?**

Choice is only genuine if you are given unbiased information. Midwives and obstetric doctors have a responsibility to advise you, using evidence-based information. If you would like further support or have concerns about the care you are receiving you can arrange an appointment at the 'Birth Choices' clinic by calling 545435.

## **Hospital contact details: (Office hours)**

Head of Midwifery: (01604) 634700 request to be put through

Meet the Matron Clinic: 01604 545435

Community Midwives Office: (01604) 523274

Birth After Caesarean section clinic : (01604) 545435 Triage  
Midwife (24 hours) 01604 523529

## **Useful websites**

[www.nctpregnancyandbabycare.com](http://www.nctpregnancyandbabycare.com)

[www.aims.org.uk](http://www.aims.org.uk)

[www.choicesforbirth.org](http://www.choicesforbirth.org)

[www.nice.org.uk](http://www.nice.org.uk)

[www.nhs.uk](http://www.nhs.uk)

[www.npeu.ox.ac.uk/birthplace/results](http://www.npeu.ox.ac.uk/birthplace/results)

[www.northamptongeneral.nhs.uk](http://www.northamptongeneral.nhs.uk)

## **References:**

1. Royal College of Obstetrician and Gynaecologists/Royal College of Midwives (2007) Joint Statement No 2
2. NICE, Intrapartum Care, (2014) DOH
3. Hollowell J, Puddicombe D, Rowe R, et al. (2011) The Birthplace national prospective cohort study: perinatal and maternal outcomes by planned place of birth Birthplace in England research programme.

## Other information

Northampton General Hospital operates a smoke-free policy. This means that smoking is not allowed anywhere on the Trust site, this includes all buildings, grounds and car parks.

Leaflets, information, advice and support on giving up smoking and on nicotine replacement therapy are available from the local Stop Smoking helpline on 0845 6013116, the free national helpline on 0300 123 1044, email: [smokefree@northnorthants.gov.uk](mailto:smokefree@northnorthants.gov.uk) and pharmacies.

Car parking at Northampton General Hospital is extremely limited and it is essential to arrive early, allowing ample time for parking. You may find it more convenient to be dropped off and collected.

This information can be provided in other languages and formats upon request including Braille, audio cassette and CD. Please contact (01604) 523442 or the Patient Advice & Liaison Service (PALS) on (01604) 545784, email: [ngh-tr.pals@nhs.net](mailto:ngh-tr.pals@nhs.net)

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[www.northamptongeneral.nhs.uk](http://www.northamptongeneral.nhs.uk)

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