

# Information Leaflet



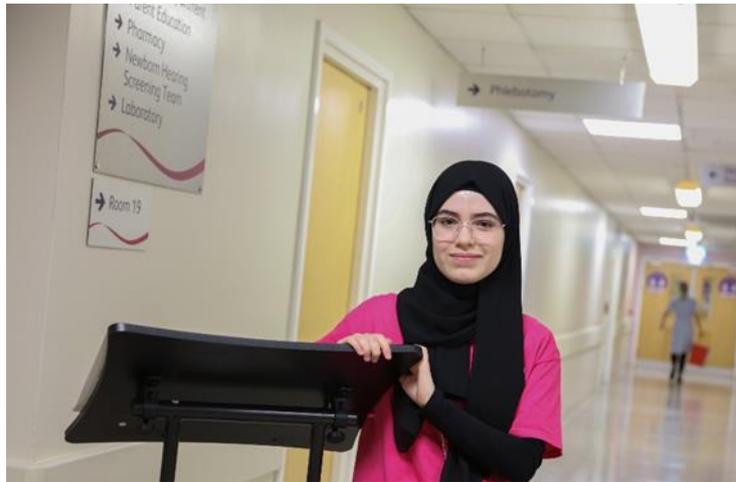
Liverpool Women's  
NHS Foundation Trust

## Birth Place Decisions Information to help you plan where to give birth



Maternity care aims to offer you personalised care. It is important that you are aware of the birth options available to you so that you can make an informed decision. Your Midwife or Obstetrician (Doctor) can help you to understand your options and you are welcome to use this document as a guide for discussion. We want to provide you with accurate information so that you can make an informed decision about your place of birth.

At Liverpool Womens, we encourage women and staff to use the 'BRAIN Tool' to support birth choice discussions. You can find further information about this on the back page of this leaflet.



This guide is intended to support you to plan where to have your baby. The information is based upon the best available evidence, including a large study of 64,500 women (Birthplace Study, 2011) and National Institute for Health and Care Excellence 'Intrapartum care for healthy women and babies (NICE CG190, 2022). The leaflet offers information to help you make an informed decision. You can alter your plans at any stage as your pregnancy progresses, or if you change your mind. The evidence shows that giving birth in the UK is generally very safe.

For most women giving birth is generally very safe. Whether it is your first or subsequent pregnancy, you will be supported to have your baby in the place you feel most comfortable and you your support partner may remain with you throughout your labour and birth. Research shows that for low-risk women you have a greater chance of vaginal birth when you deliver your baby on a Midwifery-Led Unit, or at home, compared to an Obstetric Unit (Delivery Suite).

A small number of babies will have unexpected medical problems during or after birth. Some are less serious and not permanent, and a very small number are serious and result in permanent injury. The risk is higher for babies born at home, but it is still a very small number (9 for every 1000 births) and our midwives are trained to manage emergency situations to minimise risk.

For women who are at increased risk of complications, we will recommend that you have your baby on the main Delivery Suite. This is to provide better access to a wider medical and clinical team, with more specialised equipment. However, if you would like to consider birthing at home, or on the midwifery-led unit please let us know as early as possible after your 20 week scan.

There are three options where you can give birth at the Liverpool Women's Hospital. You may choose to give birth:

At home	
In a midwife-led Unit (MLU)	
On the main Delivery Suite	

### What does 'low risk' of complications mean?

- You have no known medical conditions.
- You may have had a baby before and did not experience any complications.
- You are expecting one baby in this pregnancy.
- Your baby is head down.
- Birth takes place between 37- 42 weeks.
- No complications have developed before or during labour.

### Birth settings available at Liverpool Women's

#### Home birth

The Home Birth Team are a group of experienced midwives, dedicated to providing midwifery care throughout the pregnancy journey to women who are considering birthing at home.

The Home Birth Team provide a 24/7 service, giving you access to a known midwife throughout your pregnancy, birth and after your baby is born.

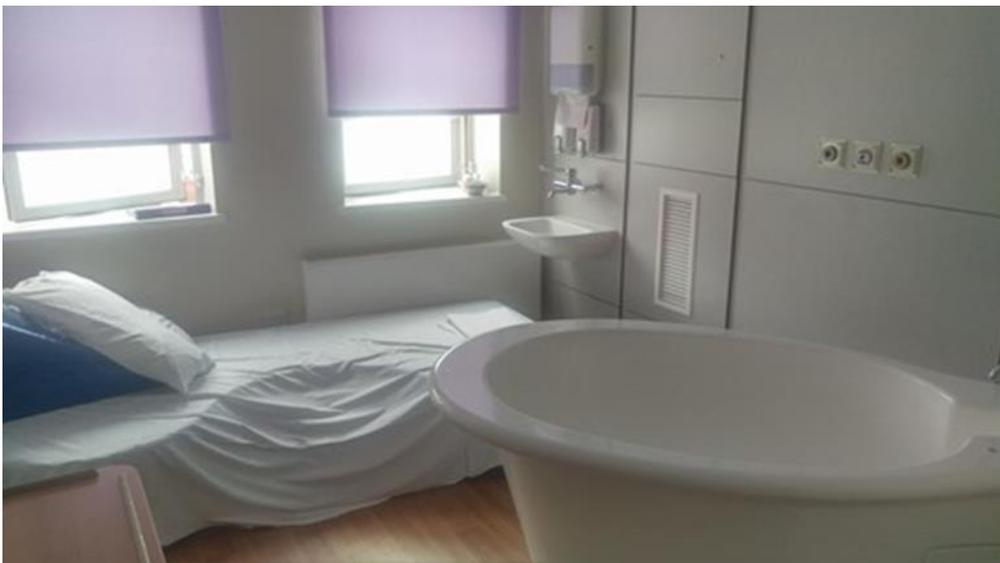
If you are considering a home birth and would like to find out more information, please contact the Home Birth Team by texting 07976835735 or by email at [home.birth@lwh.nhs.uk](mailto:home.birth@lwh.nhs.uk)



## Midwifery Led Unit (MLU)

MLU is an ideal place for women who could have their baby at home but wish to be closer to medical support. Research shows that women who are at low risk of complications, who deliver in a home environment are less likely to have intervention associated with labour and birth, and the outcome for the baby is no different compared with obstetric units.

Birthing rooms on MLU are designed to create a 'home from home' environment.



Midwives will support you to be mobile in labour and adopt upright positions to achieve optimum conditions for natural birth.

Hydrotherapy, aromatherapy and pharmacological forms of pain relief (gas and air, tablets and / or injections) are available on the MLU. Should you request an epidural, this will involve being transferred to the main Delivery Suite.



## **Delivery Suite**

Our Delivery Suite (Obstetric unit) provides specialist care for women in labour and immediately after birth. We have more equipment available to monitor you and your baby. It is recommended to birth your baby on the Delivery Suite if you are:

- Under 37 weeks pregnant.
- Offered induction of labour.
- Have a medical condition requiring specialist care.
- Having twins or triplets.
- Are experiencing bleeding in pregnancy.
- Baby is breech (bottom down instead of head down)
- Waters have broken for more than 24 hours.
- Have an infection that could be passed to your baby.

The rooms are larger with more specialist equipment ready for use if needed. All rooms have en-suite facilities.



The Delivery Suite provides 24/7 specialist care with a range of available specialists:

- Midwives
- Obstetricians
- Neonatologists
- Anaesthetists

## **What happens if I have to transfer into hospital from home?**

If you have chosen to have a homebirth, then your midwife will complete a risk assessment, ensuring your home is accessible to ambulances in the instance that you would require a transfer to hospital.

When the ambulance arrives, the crew will assess your condition so that the transfer can happen quickly and safely. In an emergency, you may be taken to the nearest maternity unit and not your preferred hospital. This will happen if it is the safest option for both you and your baby. Your personal situation will be categorised into either of the following:

**Category One:** An emergency with life threatening consequences.

**Category Two:** Transfer is required for care that is urgent, but not life-threatening. For example: delay in labour, pain relief, maternal request, perineal suturing.

Please note, there is a distinction between the ambulance response time and the transfer time from your home to the hospital. The previous months average response time for both category 1 and category 2 are available on NHS England Website and will be discussed with you should you wish to birth outside of the hospital setting.

<https://www.england.nhs.uk/statistics/statistical-work-areas/ambulance-quality-indicators/ambulance-quality-indicators-data-2022-23/>

Your personal transfer time will be a **combination** of the **response** time, plus the **estimated time travel from your home to the hospital**.

## What to do if you have not been given a choice.

There is clear NICE guidance that women who are at low risk of complications should have an opportunity to choose where to birth their baby.

Your community midwife will complete a birth assessment with you at your 36-week antenatal appointment. However, you are welcome to talk about labour and birth at any time. If you are at a higher risk of complications, it may be suggested to have your baby on the Delivery suite. However, you are welcome to attend a further appointment with a Consultant Midwife or Obstetrician to consider birthing on the MLU or at home.

At Liverpool Women's Hospital, Doctors and Midwives use the BRAIN tool to support shared decision-making and we invite you to also consider this tool when considering your options.



## BRAIN Tool

**B – Benefits:** *What are the benefits of making this decision / taking this course of action?*

**R – Risks:** *What are the risks associated with this decision / action?*

**A – Alternatives:** *Are there alternatives? If so, what are they?*

**I – Intuition:** *How do I feel? What is my 'gut' telling me?*

**N – Nothing:** *What if I decide to do nothing / Wait and see? What happens next?*

## Further Information and Resources

This leaflet is intended to support your decision about where to have your baby. Please take time to talk to your birthing partner and midwife about your needs and wishes. We want to support you to achieve a positive experience of birth.

The following resources will also help you to read around this important decision a little more:

NICE Clinical Guideline 190 (Updates Dec 2022)

[Recommendations | Intrapartum care for healthy women and babies | Guidance | NICE](#)

Birthplace Study (2011)

[Birthplace in England Research Programme | SHEER | NPEU \(ox.ac.uk\)](#)

NHS Choices (Your choice where to have your baby).

[www.nhs.uk/Pages/HomePage.aspx](http://www.nhs.uk/Pages/HomePage.aspx)

Which? Birth Choices Website

[www.which.co.uk/birth-choice.](http://www.which.co.uk/birth-choice)

**This leaflet can be made available in different formats on request. If you would like to make any suggestions or comments about the content of this leaflet, then please contact the Patient Experience Team on 0151 702 4353 or by email at [pals@lwh.nhs.uk](mailto:pals@lwh.nhs.uk)**

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