

# Planning a Home Birth in NHS Lothian

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## Benefits and safety of home birth

The Birthplace study (2011)(1) looked at a large number of women across the UK with no complications in pregnancy and compared the safety of births planned in different settings. You can read more about your choices for place of birth in the Birthplace Decisions leaflet from the Scottish Government.

If you are at low risk of complications in your labour and birth:

- Giving birth is generally safe for you and your baby
- Planning to give birth at home reduces your chances of needing interventions during your labour and birth
- For women who have given birth before, giving birth at home is just as safe for your baby as any other setting
- If this is your first baby, giving birth at home has a small increase in the risk for adverse outcome to your baby compared to giving birth in a hospital (9 in 1000 compared to 5 in 1000 or 0.9% compared to 0.5%).

If you have a pre-existing medical condition or have had a previous complicated birth that makes you at higher risk of developing complications during your next birth, you will be advised to give birth in an obstetric unit.

- The obstetric unit provides direct access to obstetricians, anaesthetists, neonatologists and other specialist care including epidural analgesia.
- The possibility of being transferred into the obstetric unit exists for all women planning a home birth, and this possibility should be discussed with you by your midwife.
- If something does go unexpectedly wrong during labour, at home or in a midwife-led unit, the outcome for you or your baby could be worse than if you were in the obstetric unit at the hospital, with access to specialised care.

## Preparing the home environment

- Choose a spacious, comfortable room where midwives and birth partners can move easily. If using a birth pool, ensure there's enough room around the pool for support.
- NHS Lothian will deliver two gas canisters and two boxes of clinical equipment to your house. Please store them in/near to your birthing room.
- Provide a changing mat and warm towels if possible on a flat, steady table where midwives will set up a baby resuscitation area should it be required.
- Keep the room at a comfortable warm temperature.
- Think about soft lighting – lamps, fairy lights, LED candles (avoid open flames, due to flammable gases). A bright, directional light will be needed if suturing is required, with a cord long enough to reach a plug socket.
- Ensure main, bright lights are functional for use in emergencies.
- Protect sofas, carpets, and/or your bed with waterproof sheets or shower curtains, with towels or old sheets on top for comfort.
- Ensure easy access to water and a toilet.
- Arrange childcare and care for your pets.
- If possible, provide a quiet space for midwives to handover, take breaks and store their bags.

## Essential supplies to have ready

- Clean bed sheets – if planning to birth in your bedroom, you may prefer to make the bed up with an extra layer of waterproofing and sheets on top. This way, once you have given birth, you can just remove the top layer of sheets to get straight into a fresh bed.
- Plenty of clean towels (minimum two large towels for you, several smaller towels for your baby).
- Absorbent pads for when your waters break (some are included in the home birth supply boxes).
- Easy-to-eat, high-energy snacks for you. (Midwives do not expect you to provide them with food, but availability to make their own tea/coffee is much appreciated.)
- Hydrating drinks - isotonic sports drinks, water, fruit juice.
- Keep your blue notes accessible. After your birth, your blue notes will be kept and stored by NHS Lothian, so please remove any personal items.
- A large bowl or bucket, for nausea.
- Liquid hand soap.
- If you are using a pool, the homebirth equipment includes a waterproof mirror and a sieve. Please could you provide a bath thermometer (the Baby Box one works well!)

## Comfort measures at home

- NHS Lothian do not provide birth pools or TENS machines, so check online for these.
- Your birth partner will need to be prepared to set up the pool independently, and maintain it at around 37°C.
- A hot water bottle to ease back pain.
- Create a relaxing atmosphere with music, aromatherapy, and cosy clothing. If you choose to use essential oils, please advise the Labour Line when you phone, as some on-call midwives may not be able to attend.
- Hypnobirthing can be an effective pain relief tool - books and classes are available.
- Entonox (gas and air) will be delivered before labour; midwives will guide you on its use.

## Organising the practicalities

- Keep your phone charged and save the hospital phone numbers.
- Make sure your house is easily located - consider adding something identifying to your gate, e.g. a balloon/a sign, so that midwives or paramedics can find your home in the dark.
- If you can, leave parking space near your front door, so that midwives can easily bring in their equipment.
- Keep your 999 Prompt Sheet easily accessible.
- Midwives use NHS Lothian laptops for documentation – we may need to charge these, so we would appreciate use of a plug socket.

## In case of hospital transfer

- Please pack a hospital bag, just in case, and keep it nearby.
- If you drive, please ensure your car has adequate fuel to make a journey to hospital, and please fit your baby's car seat in your car prior to labour, or make sure you know how to do so quickly.
- The rate of transfer for first time mothers is around 45%, and for those who have given birth before it is around 12%. The main reason for transfer is slow progress in labour. (1)

## After the birth

- Prepare a clean, warm area for you and your baby to rest.
- Have a comfortable outfit ready to change into – pyjamas are perfect! Keep some comfortable underwear and maternity pads accessible.
- Baby items – a nappy, vest, babygrow, woolen hat and a cellular blanket, and ideally a changing mat somewhere with good visibility for your midwife to perform the initial examination of your baby.
- If you are planning to formula feed, please have formula, bottles and a steriliser ready.
- Ensure you have supplies of paracetamol and ibuprofen for at least a few days following the birth.
- Prepare to rest as much as possible – identify people who can support you to have nutritious meals, regular hydration, and to help with practical care of the house and any older children as you recover.

## Postnatal midwifery care

- Midwives will stay for 2-3 hours after the birth.
- This will involve offering initial wellbeing checks for both you and baby, and supporting your baby to have their first feed.
- A midwife will aim to visit you again within 24 hours, usually when baby is around 6 hours old as we offer a pulse oximetry test for baby at this point to check their circulatory system.
- A specially trained midwife will be able to perform the Newborn Examination (NBE) for your baby between 6-72 hours of age.
- A referral will be sent with your consent for your baby to have an outpatient audiology (hearing) screening.
- You will be offered home visits from midwives on day 1, 2, 5 & 10, and a phone call on day 7, with any extra visits in between as needed.
- Once you are discharged from the midwives, the Health Visitors will be in contact to arrange their first visit.

## Health and safety for midwives in your home

When you choose a homebirth, your home becomes our workplace! Please consider the following items to keep midwives safe:

- If you or your birth partner smokes, please either refrain from smoking during your labour and birth, or smoke outside.
- Please keep the birthing room clutter free to avoid trip hazards.
- Please advise the Labour Line if using essential oils for aromatherapy.
- Please remove any aggressive or overly friendly animals from the birth space.
- The midwife may ask you to adjust your position so they can perform their clinical duties (e.g. to listen to baby's heartbeat) without overstretching – we would appreciate your cooperation with this.
- Midwives are not permitted to do any heavy lifting during your homebirth – if any furniture needs to be moved around, or in the rare scenario that you faint or collapse, we would ask your birth partner(s) for help.

## Freebirth

Freebirth is intentionally giving birth with no trained health professionals present. It is within any pregnant woman's rights to decline any aspect of care that we offer, and this may in rare cases extend to declining care altogether. Although there is little research on the safety of Freebirths (2), it is possible that there may be increased risks for you and your baby, as complications may go undetected and untreated.

If you are considering freebirth, please discuss with us your concerns around the care we are offering, so we can discuss any acceptable alternatives to help protect the safety of you and your baby.

## Options for induction

Pregnancy typically lasts approximately 40 weeks, with full term ranging from 37-42 weeks. In NHS Lothian, we recommend considering an induction of labour from 41 weeks' gestation as this is the point where research tells us that the stillbirth rate can be decreased without increasing the need for a caesarean section (3). Your midwife will give you an induction leaflet, and discuss your options, including your right to decline. If you choose to wait after 42 weeks you will be offered extra monitoring in the hospital, usually twice a week.

## On-call system

At 37 weeks, once your boxes and gases have been delivered and checked, the on-call for your labour can commence. When in labour, please phone the dedicated Labour Line number (on the equipment box). The midwives there will chat to you and contact the midwife on-call if needed.

A second midwife will attend at some point during the labour. If a shift change is required during your labour, your midwife will arrange for another midwife to come and take over your care.

NHS Lothian aims to provide a home birth service to all women who choose to stay at home to birth. However, this is not an absolute guarantee and sometimes, due to the number of women birthing at any one time and the midwives available, in the interest of safety for you and your baby, or in severe adverse weather conditions where it's unsafe for midwives to drive, you may be asked to attend the hospital to give birth.

## What happens in an emergency?

If your midwife detects any early concerns during your labour, they will discuss this with you, and they may recommend transferring to hospital.

Midwives can provide only low risk care at home and are trained to provide an initial response to labour and birth emergencies. Most emergencies will involve transferring into hospital for specialist care, this would be by ambulance. A paramedic and a midwife will accompany you in the ambulance, and your birth partners will need to meet you at the hospital. If you need to transfer to hospital after giving birth, your baby may need to travel separately to the hospital.

In an emergency, your midwife will ask for the lights to be turned up and may ask your birth partner to phone 999 while they provide clinical care to you or your baby.

## More information

Please ask your named midwife if you have any other questions or requests.

For more information you can visit our website:

NHS Lothian – Home Birth



<https://services.nhslothian.scot/maternity/where-do-i-want-to-give-birth/homebirth/>

