



## Booking a Homebirth

**Please note that this page is awaiting update**

There is information about your right to a homebirth in our book [AIMS Guide to Your Rights in Pregnancy & Birth](#) (principal author Emma Ashworth.) You may also be interested in [Why Home Birth Matters](#) by Natalie Meddings. Both are available from the [AIMS UK Shop](#)

### Your right to a Homebirth

**The following information applies in normal circumstances. If you are told that your local NHS Trust is not providing support for homebirths due to the coronavirus pandemic please see the section Homebirth and coronavirus below.**

The decision whether or not to have a homebirth rests with the mother, and no-one else. The decision is hers alone. Midwives, GPs or obstetricians have no authority to agree or deny anyone a homebirth, they are there to ADVISE. Whether or not you accept their advice is entirely up to you. Some women have been told that it is 'illegal' to give birth at home. This is untrue.

In order to justify an attempt to refuse a woman a homebirth some women are told that they are 'high-risk', for example, they may have had a previous caesarean section. If you are classed as 'high-risk' you can ask the doctor or midwife to put in writing precisely why s/he considers you to be so. It is not uncommon for women to be labelled as 'high-risk' as an excuse for urging a hospital birth and it is important to establish what the risks are perceived to be. However, even if a doctor has defined your pregnancy as 'high risk' you are still entitled to midwifery care and to have your baby at home if you wish.

You do not have to approach your GP in order to book your homebirth, you can write directly to the Director of Midwifery Services at your nearest maternity unit along the following lines:

*Dear*

*I am expecting a baby on the ... and intend to give birth at home. I have carefully considered the risks of homebirth and compared them with the risks of hospital birth and I am not prepared to risk my, or my baby's health, by giving birth in hospital.*

*I would be grateful if you would arrange for my care to be provided by a midwife who is experienced and confident in assisting women to birth at home.*

Yours sincerely

The Director of Midwifery has a responsibility to provide a midwife and if you have any problems making these arrangements do not battle alone, contact AIMS.

## Homebirth and coronavirus

If you are already planning a homebirth, or you wish to do so, Article 8 of the Human Rights Act protects your right to birth where you choose. In normal circumstances if you made the decision to birth at home, you should be able to expect NHS care for the birth, but you do not have a right to support if there is a genuine emergency which makes this impossible. This does not mean that you can be **required** to birth in hospital, but that your Trust may not guarantee medical support if you decide to birth at home.

Due to the coronavirus pandemic many Trusts seem to be withdrawing support for homebirths, or telling people that support 'cannot be guaranteed', but others have put extra resources in place to ensure that women wishing to have a homebirth can be supported to do so. If you are planning a homebirth, you will need to check the situation in your local area.

The Royal College of Midwives (RCM) and the Royal College of Obstetricians and Gynaecologists (RCOG) have jointly published "[Guidance for provision of midwife-led settings and home birth in the evolving coronavirus \(COVID-19\) pandemic](#)". Although Trusts are not obliged to follow these guidelines, they represent what the professional bodies consider to be best practice. You can find details of their recommendations here [www.aims.org.uk/information/item/coronavirus#post-heading-8](https://www.aims.org.uk/information/item/coronavirus#post-heading-8). They include recommended levels of midwife-led services to be maintained or re-instated according to the degree of staff shortage and/or ambulance service availability, and alternatives that should be considered. They also point out the need to consider "Available midwifery staffing (including additional midwives from the NMC emergency register, independent midwives, those previously in non-clinical roles or year-3 student midwives)"

Below is a template email which you may wish to send to the Head/Director of Midwifery and the Chief Executive at your local NHS Trust to ask them to explore solutions that would enable you and other mothers to have support for a homebirth. Their email addresses should be available on the Trust's website or by phoning the Maternity Department. We suggest that you also send a copy to to the AIMS helpline [helpline@aims.org.uk](mailto:helpline@aims.org.uk) and to your local Maternity Voices Partnership (MVP) or Maternity Services Liaison Committee (MSLC). Details of these may be on your Trust/Board's website and many have their own Facebook page or website, or you can look for your local MVP here [Find an MVP – National Maternity Voices](#). You might also want to copy the people listed below, Do make it clear in your email who else you have sent it to as this may help to focus people's attention on their responsibilities.

Others you might like to send your email to are:

If you live in England:

- Your local MP ([find your MP](#))
- Maria Caulfield MP, Parliamentary Under Secretary of State (Minister for Patient Safety and Primary Care) [maria.caulfield.mp@parliament.uk](mailto:maria.caulfield.mp@parliament.uk)
- Jonathan Ashworth MP, Shadow Secretary of State for Health and Social Care [jon.ashworth.mp@parliament.uk](mailto:jon.ashworth.mp@parliament.uk)
- NHS England Maternity Transformation team [england.maternitytransformation@nhs.net](mailto:england.maternitytransformation@nhs.net)
- Professor Jacqueline Dunkley-Bent, Chief Midwifery Officer, NHS England [jacqueline.dunkley-bent@nhs.net](mailto:jacqueline.dunkley-bent@nhs.net)

We believe that the following are correct for Scotland, Wales and Northern Ireland, but please let us know if you know otherwise by emailing [enquiries@aims.org.uk](mailto:enquiries@aims.org.uk)

If you live in Scotland:

- Your local MSP
- Jeane Freeman MSP, Cabinet Secretary for Health and Sport [CabSecHS@gov.scot](mailto:CabSecHS@gov.scot)
- The Maternity and Children Quality Improvement Collaborative [hcis.mcgic@nhs.net](mailto:hcis.mcgic@nhs.net)
- Professor Ann Holmes, Chief Midwifery Advisor & Associate Chief Nursing Officer, Scottish Government [ann.holmes@gov.scot](mailto:ann.holmes@gov.scot)

If you live in Wales:

- Your local AM
- Vaughan Gething AM, Minister for Health and Social Services [Vaughan.Gething@assembly.wales](mailto:Vaughan.Gething@assembly.wales)
- Wales Maternity and Neonatal Network Contacts [elizabeth.gallagher@wales.nhs.uk](mailto:elizabeth.gallagher@wales.nhs.uk) / [jacqueline.davies1@wales.nhs.uk](mailto:jacqueline.davies1@wales.nhs.uk)
- Karen Jewell, Nursing Officer for Maternity and Early Years, Welsh Government [Karen.Jewell@gov.wales](mailto:Karen.Jewell@gov.wales)

If you live in Northern Ireland

- Dr Dale Spence, Midwifery Officer, Department of Health, NI [Dale.Spence@health-ni.gov.uk](mailto:Dale.Spence@health-ni.gov.uk)
- Robin Swann MLA Minister of Health in the Northern Ireland Assembly [robin.swann@mla.niassembly.gov.uk](mailto:robin.swann@mla.niassembly.gov.uk)
- Dr Patricia Gillen & Dr Maria Healy (Chairs of the Home Birth Group) [p.gillen@ulster.ac.uk](mailto:p.gillen@ulster.ac.uk) [maria.healy@qub.ac.uk](mailto:maria.healy@qub.ac.uk)

Dear

I am {x} weeks pregnant and due on {date}. I have been planning to have a homebirth but have just been told by my midwife that {name of local NHS Trust} is no longer providing midwifery support for homebirths due to the coronavirus pandemic.

I know that legally I have a right to birth at home and cannot be compelled to go to hospital to give birth, yet these rights are being ignored.

{Give details here if you wish of the reasons why you want a homebirth and/or why birthing in hospital would cause problems for you e.g. previous birth trauma, childcare issues, concern over coronavirus.}

I feel that I am being denied what should be a basic right to birth in the place where I will feel most safe. I cannot afford to pay for an Independent Midwife. {You may want to add: I am now having to consider birthing at home without medical support. This is not an option I would normally choose but feel that if midwifery care continues to be declined, I will have no alternative.}

RCM and RCOG have recognised in their ["Guidance for provision of midwife-led settings and home birth in the evolving coronavirus \(COVID-19\) pandemic"](#) that "Continuation of as near normal care for women should be supported, as it is recognised to prevent poor outcomes." They also comment that "Emerging evidence from European settings supports continuing to strengthen community services in order to enable social distancing and minimise spread in healthcare settings."

I appreciate the need to protect midwives at this time, but surely keeping midwives working in the community and attending homebirths where they are less likely to be caring for women with COVID-19 has to be safer for all? I know that some Trusts are actively encouraging low risk women to consider homebirth because this reduces the risk of exposure to coronavirus for women, their families and their midwives.

I would like to know whether the Trust is following an escalation/de-escalation plan as set out in the RCM/RCOG guidance, and what the current state of midwifery staffing shortage and ambulance provision is in this area.

RCM/RCOG say that homebirths should not be stopped just because of inability to provide two midwives. Rather, Trusts should consider using "senior student midwives, returning registered non-clinical midwives, returning recently retired midwives or appropriately prepared maternity support workers to attend as the second member of the team for low-risk home births". Please let me know whether this option has been explored.

I am aware that other NHS Trusts are continuing to offer support for homebirths, for example by having dedicated groups of midwives who only work outside the hospital, having senior midwives on an on call rota to support either a complex birth plan or to support staffing levels, or even giving contracts to independent midwives. The latest RCM/RCOG guidance also suggests that "available midwifery resources" should include independent midwives. The Independent Midwives UK association (IMUK) has offered their services [imuk.org.uk/news/independent-midwives-uk-covid-19-statement/](https://www.imuk.org.uk/news/independent-midwives-uk-covid-19-statement/) but have been informed by NHS England and the Chief Midwifery Officer that "it is to be left to local HOMs and DOMs to decide if they need Independent

*Midwifery support.” {If you know of local Independent Midwives who would be willing to offer their services to the NHS you may want to mention them too.} Please let me know whether this option has been explored.*

*{If the issue is about ambulance cover you might like to add} We appreciate the pressure on NHS ambulance services but I am aware that other Trust have contracted private ambulance services to cover any transfers into hospital. Please let me know whether this option has been explored.*

*I urge {name of local NHS Trust} to explore whether there is a solution which could be implemented to enable myself and other mothers choosing a homebirth in this area to have the midwifery support we need.*

*I look forward to your reply.*