



Where is the support?

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Jeanette Stevens shares her experience of the effects of home birth service suspension

It was a lovely Friday afternoon in May 2015 that I found out that I was expecting my third baby. I will always remember it well as it was the very same Friday on which we celebrated my husband's grandad turning 100, so good tidings all around!

There was no doubt in my mind that this baby too, as our son and daughter had, was to be born at home. I could imagine for no other place for me to give birth as my two previous births at home had been amazing, relaxing and very empowering.

My first, a son named Jensen born in 2012, arrived here at home using the then still active home birth team from Queen Elizabeth Hospital in Kings Lynn. No issues with the maternity service nor the birth as it was straightforward, quick and without any intervention. I remember the midwives just standing by at the sideline and it made it much more private, especially as once he was born they left us to it and soon it was just our recently expanded family of three alone in the house. Magical.

Our second baby, a daughter named Penelope, born in 2014, arrived at home too without any intervention, pain medication or other assistance. However when I was 32 weeks pregnant the QEH suddenly withdrew its service for home births and cited low staff and budget as a reason for their temporary suspension. It was a dreadful couple of weeks as the QEH left us hanging, offering us no alternative other than the birth facilities at the QEH, where they only have an obstetric-led maternity ward. A far cry from the birth we had had with Jensen. I recall many tears being shed, feeling very nervous and afraid of possibly having to go to hospital.

Devastated is perhaps the most accurate description of how I felt and it was very disheartening to imagine that my daughter wouldn't be born at home. I made contact with Elizabeth from Birthrights and Beverley from AIMS, and with their guidance and advice I felt a bit more empowered and ventured down the route of hiring an independent midwife. Not a cheap option, but we were getting no help from our local NHS services. We still kept pressure on the QEH and the local CCG to reimburse us or assist, however all our correspondence fell for deaf ears. We had the local MP contact them on our behalf, did countless newspaper articles, and went on BBC news and the radio. We campaigned endlessly but the hospital did not budge at all. I went into labour a day early with my daughter but was reassured as I knew I had my independent midwife, Nicky Garrett of Iceni Independent midwifery booked, she was wonderful and had been a pillar of support the last five weeks running up to the birth.

Fast forward to this joyful day in May, and despite the fact that it should have been the most wonderful day I suddenly realised that we faced another uphill battle with the QEH and CCG to assist us in achieving something that should be our right, to birth our child at home. The home birth service was still suspended – I knew as I had not stopped campaigning for its reinstatement. I thought though (naively) that given us knowing well enough in advance that we could work with them to allow for them to either subcontract an independent midwife or for the CCG to allocate a sum of money for me to use to hire an IM myself – something which is possible using guidelines laid out. I would soon learn that it would be a long and painful battle again, one that no expectant mother should have to embark on in order to have her choice upheld.

The day I had my 12 week scan I sent off a letter to the CCG and the QEH respectively – both pre-prepared with the ultimate statement that I would not be going to hospital so could they please advise how they were to provide maternity cover for me. Sounds simple enough and one would think that 28 weeks would be sufficient for them to make some sort of arrangement, that was, however, not to be the case. I was met with a '*we have no home birth service available so your option is to birth in the hospital ONLY*', every single counter argument which I raised was either ignored or just answered with that same statement. As a matter of fact, the QEH took three months to respond to my letter despite me chasing them constantly – disgraceful given that I was on a strict timeline – the baby wasn't going to wait just because they chose to be slow. Perhaps they did it deliberately as they knew I would run out of time? Elizabeth stepped in again to try and help and we had a solicitor assist with penning the letters and also raising more legal pressing questions and going down routes of which I was unaware. I had three meetings with the hospital, every single time we asked how they would support us they just stated the had no home birth service. Not very reassuring and it gave me a sense that no one cared. Both my son and daughter had been quick labours so we raised the question from the beginning how they could justify us risking a lay-by birth with them refusing us assistance at home. No response. Ever.

We went down the route of trying to get the CCG to allocate money to us, however, by the time the CCG responded they claimed this procedure would take too long as a medical plan needed to be made and this required 12 weeks. 12 weeks which they would have had had they started it when I wrote to them

following my 12 week scan. They even had the audacity to state that I had never asked directly for this service. Apparently asking '*what can be done to assist me*' is not sufficient, you, as an expectant mother, have to understand the loopholes and procedures yourself and tell them what can be done!

The QEH were no better as they claimed that as I wanted a home birth they could not facilitate an independent midwife as they would not get paid, thus not have the money. This turned out to be false as we contacted the CCG and they said this could be facilitated. However then the QEH put forth more excuses, one after another was shot down and another put up. It was tiring and hurtful as it felt as if though they truly didn't care.

In early January we had another letter saying that the most recent arguments which we had raised could not be met for various reasons and we simply ran out of time to pursue it any further and I, personally, was done. I didn't want to get any more upset so, despite having no funds for hiring an independent midwife, we contacted the IM who supported our daughter's birth. I felt at ease, ready, still angry at the QEH and CCG, but as they obviously had no care for my wishes nor the safety of my child we felt this was the only route we could take.

On January 26th I went into labour at 10.05 PM. My husband heard me potter about upstairs and came to check on me. I told him to ring the midwife as the second contraction hit. And when I say midwife, we both knew we'd be calling upon the independent midwife. Not once did we consider calling the QEH who had denied us the right to a home birth and clearly said several times that should we call, we would be sent an ambulance or be asked to travel to the hospital. I had no desire to be arguing with them about this whilst in labour, I had only the birth of my son in mind and wanted it to be peaceful and safe. Having a mind full of anguish, uncertainty and worry was not going to facilitate that.

Turns out that the argument which we had raised with them about us not wanting to risk a lay-by birth was a very true one, as less than 55 minutes later our third baby, a son who we named Lucien, arrived – caught by my husband – unassisted. Or as some would call it, freebirthing. Not by choice, and not something I would want to do again. It was, however, amazing, and extremely empowering to greet this little person with no other assistance than my husband. It was, I should note, no fault of the IM that she wasn't there for the labour, we rang her immediately but she is based an hour away (the QEH is 20 minutes away). She arrived 20 minutes after our son Lucien had arrived, found us all snuggled up on the sofa and later told me that she felt bad to be intruding on such a special moment as we looked so at peace. A piece of peace which she facilitated as she gave us the reassurance to have a home birth. She might not have made it for the birth but she tried and wanted to, and she was there afterwards to assist with the afterbirth and check that we were both well.

Birth is such a special moment, a moment which may not mean much to anyone else but one you will forever remember. It is appalling that women are being denied a right to choose. Queen Elizabeth Hospital in Kings Lynn will, in September this year, have had their service suspended for three years and there are no signs of the service being reinstated or alternatives offered.

Jeanette Stevens

AIMS Comment

This article is deeply sad. It is an account of the undermining of a woman's right to stay at home and insist that someone comes out to her. AIMS suspects that her notes could contain a very interesting record of the Trust's reasons for the decisions made. AIMS is concerned that approaching this problem within a more formal legal framework may actually be giving Trusts the loopholes they have been looking for, whereas the AIMS 'stand your ground and make them come to you' approach has proved effective in the past and is less easy to just ignore.

As Jeanette did not phone the hospital when she went into labour, because she did not trust them she had made other arrangements, we do not know what would have happened if she had insisted that she was staying at home and would decline an ambulance transfer. Would QEH have actively told a woman to freebirth? Would they have tried to insist on a transfer to hospital after the birth? We simply do not know. What is clear is that all Jeanette really wanted was a midwife to know and trust who would support her when she birthed her baby in the place of her choice.

The previous *AIMS Journal* – Vol:28 No: 2 – drew attention to the award by the Ombudsman of £1,000 consolatory payment to Mrs Jane Reeve who had a similar experience. Both Jane Reeve and Jeanette Stevens were able to engage an independent midwife and one might speculate that the staff were aware of that possibility and waited to see what would happen, thereby solving the problem without the Trust having to do anything creative at all. Many women, however, are not able to pay for private care or do not have an independent midwife within reasonable travelling distance.

Those who intend to birth at home need to make it very clear to the Trusts that they have no intention of coming into hospital or engaging an independent midwife; and they expect the midwife to come when they call. Midwives have a professional obligation to attend when called and it is wise to remind a Trust of this fact and that should any untoward event occur as a result of their failure to send a midwife the family will take legal action.

Were that to happen the Trusts would be faced with a fee far larger than £1,000. It is unacceptable, however, that any woman is subjected, in the latter stages of pregnancy to the stress this uncertainty of support generates.