AIMS For a better birth...

# My Airedale Midwife

AIMS Journal, 2014, Vol 26 No 3

*An NHS midwifery caseloading initiative in Yorkshire*

When mothers started voting with their feet and referring themselves to privately-owned One to One Midwives, and campaigning for their individualised, caseloading services in Yorkshire, the NHS responded by setting up My Airedale Midwife (MAM) project.

On its website and through information leaflets, scheme is described thus:

*My Airedale Midwife is a pilot project providing a personalised midwifery service to women at Airedale starting in January 2014. MAM midwives are here to support*

- *Women who choose to have their baby at home*
- *Women who choose a VBAC (Vaginal Birth After a Caesarean birth)*
- *Women under 20 years*
- *Women with complex social needs.*

*My Airedale Midwives believe that the woman should be at the centre of her care. We believe that giving birth is a normal part of life and will provide continuity and support for you in your journey to motherhood making your experience positive and fulfilling.*

*Each MAM midwife will provide personal one-on-one care throughout your pregnancy, in labour and immediately following the birth while you are getting to know your baby.*

*We will help you make the decisions that are right for you using the latest evidence as a guide and we will support you in your choices.*

*We will be with you wherever you decide to have your baby whether at home, in our new birth centre or on the consultant led labour ward ensuring that you and your baby are safe at all times (www.facebook.com/myairedalemidwives).*

The Bradford Telegraph and Argus featured the new practice, entitling its article Call the Midwife – and get the same one![1] It went on to say that, *'where requested, the midwife can accompany the person to clinics and provide all antenatal care. 'Women who want a homebirth or who have had a previous caesarean section and wish to consider a vaginal birth, or have complex social needs, will be able to use the scheme.*

*'Claire Mathews, head of midwifery at Airedale NHS Foundation Trust,*[now former Head of Midwifery]*said: "The MAM project recognises that for some women, having one midwife they can get to know and trust can make a huge difference to how they cope with their pregnancy, labour and the birth of their baby."*

*The MAM team will also provide hypnotherapy classes in the community. Professor Lesley Page, president of the Royal College of Midwives said, 'Expectant women can benefit from the continuity of care they will receive from the MAM project, which can mean less intervention during the birth.*

*'The trust and the midwifery team should be congratulated for this enhancement to their maternity service.'*

New mum Katrina Smith told AIMS:

*'I joined the MAM team following my previous emergency section back in 2010 after my induction stopped at 8½ cm. I was determined to have a natural delivery this second pregnancy but seen as both my pregnancies are through ICSI/IVF I was consultant-led from the start. The consultant advised me it would be best to have another section as there were too many risks involving my uterus rupturing. Once I met the MAM team they gave me all the information involving the risk and I decided against another section. I have also been on the hypnobirthing class that the MAM team offered for free which was a fantastic course and was very helpful for my delivery. I am so pleased with the service from MAM team and also so pleased to have a midwife I can contact via a phone call or even a text and get a response back. So we did eventually end up having a*

*natural delivery. I used my hypnobirthing CDs and Caroline Allen came and supported both me and my husband from the start until delivery. I did end up having to be cut and I did loose some blood but I did it all on just gas and air. I had a beautiful daughter Isla Keziah Joy who weighed 9lb 11oz so not on the small side. I have had continuous support from Caroline even after delivery. I can not recommend the team more and feel that every woman out there should have the same service.'*

Local childbirth groups and activists are concerned that this is a pilot project and that these kinds of projects often come to an end after the time alloted to them. This can be due to funding not being made available, key people leaving and other reasons. They also point out that only 10% of women are served by this project, but that all birthing women want and would benefit from this type of midwifery care, and that caseloading care was guaranteed by the CCG in Airedale by the first half of 2015. We hope that caseloading will become the norm and that it will be extended to all women in Airedale and elsewhere. We await further developments.

**References**

1. http://www.thetelegraphandargus.co.uk/news/11021423.Thank_you_MAM_for_new_Airedale_midwife_care_scheme/