



2023

Report from the Home Birth Listening Event





Home Birth Listening Event

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Home Birth Listening Event

Background

Nottingham University Hospitals (NUH) Maternity Service held a 'Whose Shoes?®' home birth workshop on 27 January 2023. Whose Shoes® is a session based around a board game which helps players put themselves into the shoes of another person and consider a service from a different perspective.

After that workshop NUH were contacted by a parent who had attended the event. They asked if NUH would consider facilitating a meeting between women and parents and the Director of Midwifery to share how NUH being unable to support their birth place choice had impacted on them. They felt that the event on 27 January did not create space to honour the emotional impact of being prevented from birthing at home.

This request was shared with with the senior midwifery team at NUH and it was agreed that the operational lead midwives would run a Home Birth Listening Event.





What did the Event look like?

When did the Listening Event take place?

The Home Birth Listening Event took place in person at the Trent Vineyard Conference Centre in Nottingham on the 19 July 2023.

Who attended the Home Birth Listening Event?

Attendees of the event included members of the Nottingham Home Birth Group, any parents and families who chose to have a home birth and people who had chosen to have a home birth but were unable to. Staff from NUH also attended.

What was the purpose of the Listening Event?

The purpose of the event was for maternity staff and senior midwifery staff to listen to the experiences of people who had used or been unable to use the Home Birth Service. It was a safe space for people to share their personal experiences and reflections about the Home Birth Service currently and their ambitions for the Home Birth Service in the future.



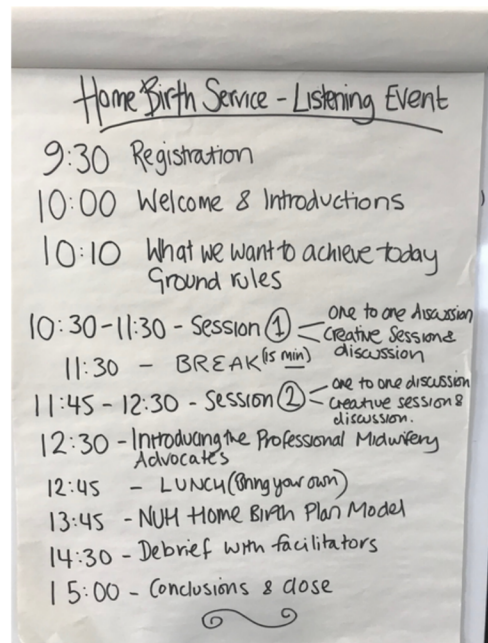
Home Birth Listening Event

What was the Agenda for the day?

The Listening Event was a facilitated event, with the following agenda for the day:

- Discussion as a group about people's experiences and feelings about home birth services
- Individual one to one discussions between parents and midwifery staff
- Artistic exercises to express feelings including drawing and poetry
- An update from NUH about the proposed new Home Birth Service
- Discussions about people's aspirations for a future home birth service

The agenda on the day was flexible and participants were able to shape when the sessions and discussions took place.



Home Birth Service

Listening to you - your creative reflections and anonymised one-to-ones

The main purpose of the Home Birth Listening Event, was to listen and capture the experiences and feelings people had when using the Home Birth Service and also to capture the experiences and feelings people had when they were unable to have a Home Birth. This information would then be used to support the redevelopment of the Home Birth Service.

One of the ways we captured people's thoughts, feelings and reflections about the Home Birth Service was through creative reflections using artwork, poems or stories.



Home Birth Service

Your Poems

People who attended the day wrote acrostic poems to express how they felt about the Home Birth Service.

How did the "service" impact my labour experience?

Only wanted to be at home in my own space, comfortable

My back hurt so much! I felt so disappointed in myself and my body

Even though i knew the service was poor, I hoped and expected to have a homebirth

But alas, it was not to be, and I felt so silly thinking it would have

Iregret the back and forth communication in early labour

Rather have no communication next time

Trust your body, not the system

Homebirth is a right



Written Reflections

People completed written reflections about their home birth experience as part of the reflective session.

What happened?

There was no home birth service available so I was told to attend QMC for my daughter's birth.

What were you thinking? List some thoughts

- Why did I think it would be any different for me?
- Why didn't I put any thought into a hospital birth?
- Why did I put so much hope and effort into a home birth?
- I didn't want to go to Hospital
- Maybe if I can wait a little longer someone can come...

What did you feel? List some feelings

Scared, Disappointed, Angry, Let down, Sad, Hopeful, Confused, Unimportant, Uncared for, Unsupported, Unloved, Increased pain.

Early labour slowed right down and I feel that it was due to knowing my plans were changed, out of my control- baby also "stuck" in occiput posterior position for a lot of labour.

What did you do? List some actions

Asked for help and support, cried, shouted

Got in my head, tried to stay at home

Wanted to go to hospital earlier than I would/should have due to fear and anxiety.

What was good?

- Initial assessment at home
- Supported to stay at home by some staff
- First Midwife and Midwife for birth very supportive and understanding of situation - tried to make experience as 'home birth' as possible in line with 'birth plan'

What was bad?

- Constantly told their "might" be a service
- Being told there was NO service - wouldn't have got my hopes up and I could have made other plans
- Midwives during majority of labour (day shift) were not "low risk" and their care massively impacted my experience (negatively).

Home Birth Service

Your Poems

Homebirth- birthing in my happy place

Optimism- full of optimism/positivity

Maternal- motherly hormones flowing

Exciting/ empowering feeling

Beautiful - scene

Introverted - focusing on the task in hand

Relaxed

Threatened service

Homely- in my own home where I am in control



Personal experiences of Home Birth – one to one discussions

Impact of COVID 19

"My home birth experience was impacted by testing positive for Covid, being isolated from my wife, being told there was no midwife for home birth service".



Certainty for birthing people is a really big factor. It was important to me to have a home birth; safe space, daughter could be present, I didn't want a medical birth. I was keen to birth at home but aware might not have a chance due to staffing. Felt a spark of hope which made not getting a home birth worse – would rather not have had this bit of hope.

What happened?

When labour was establishing – called Doula, had some acupuncture. Later that evening I got in the birth pool for a bit. Labour was more intense – hospital was still unable to facilitate my home birth.

I had the very difficult choice of freebirth or going in and I am still unsure if I made the right decision.

I agreed to go in if I could have 2 birth partners and a birth pool and was supported in these choices.

At hospital I laboured in the pool for some time. I asked the doctor for some pain relief but was told I would need to wait til after 6pm after eating. I asked for a vaginal examination to know where labour was at, was 6cm at this point – unsure if I was swept, but I did not consent to this.

Later I found the strength to birth a son.

After my birth

Suffered from Postnatal depression and diagnosed with complex PTSD.

I was signed off work and I am still medicated. The lack of home birth contributed to this.

"Felt a spark of hope which made not getting a home birth worse – would rather not have had this bit of hope"

Home Birth Service

Your Poems

H

ome is my safe place

O

n the ward is not where I wanted to be

M

y mind and body falters without the certainty

E

ach night I hope for a midwife

B

ut it is not to be

I

n desperation I make the transfer

R

hythm falters, my mind-body exhausted

T

hree days of contractions later

H

ow I found the strength to birth, I do not know



Written Reflections

How did the experience impact on other people close to you?

Husband- scared, did not get the experience he had hoped/planned for, felt abandoned by hospital staff- trauma.

Daughter- born with much more intervention than I wanted or would have had at home.

How are you and the people close to you now? Have your needs been met?

Trauma reduced, feel motivated for next birth
Husband very put off having further children
Needs partially met by staff

Request of myself, what do I need to do next?

Engage further with hypnobirthing and a Doula in future pregnancy/birth
Disengage/engage less with maternity services.

Request from others, what do I need others to do next?

Put a robust and reliable home birth team (continuity) and service in place asap.

What have I learnt from this experience?

To trust myself and my body.

Home Birth Service

Your Poems

H

opeful- meet expectations for the future

O

ptimistic - that the service will be amazing

M

eaningful- choices for women

E

ncouraging- support choices regardless

B

irthing place- openness to change

I

nformed - patient centred/risk assessed /support choices

R

elaxed environment- improve outcomes

T

rusting - continuity helps women's outcomes

H

olistic - good for women/babies and staff

Personal experiences of Home Birth – one to one discussions

Missed opportunity to Labour at Home

"My birth story feels really hurtful, which is difficult as this is the start of the relationship with my child"



My home birth experience in summary

I hoped for a home birth

I was pregnant during Covid. Missed opportunity to labour at home. Now left with feelings of grief associated with her birth

Birth story feels really hurtful which is difficult as this is the start of the relationship with my child.

What happened?

When labour started, no community staff covering night shift

Stayed at home as long as possible and decided to attend hospital for analgesia

City was closed, so went to QMC. I asked for an epidural, but very tearful with feelings of failure at this point

Partner was very anxious and very emotional.

I had a post-epidural headache and difficult initial period after giving birth leading to a prolonged hospital stay

Then delays in going home due to staffing and printer issues.

"I missed the opportunity to labour at home. Now I'm left with feelings of grief associated with her birth"

Home Birth Service

Your Poems

How can I help? How to be 'with women'?

Our Home Birth Group, created to support

Made to nurture, listen, hold

Everything different when home birth is not an option

Before, years ago, most stories were told

In joy, eyes shining. In

Recent times, too often eyes shine with

Tears, tracing tracks of trauma on faces

How I long for those happy stories, those shared experiences, those shining eyes.

Personal experiences of Home Birth – one to one discussions

Our Home Birth Experience

"When my second child was born, my first was just waking up and came in to see her sister- it was a lovely experience as a family".



My birth experience is discounted by family and peers because I birthed without attendance – people think I'm a bit of a looney

There were no midwives available when I gave birth at home with my first baby

For my second pregnancy I hired a Doula. I had met her before and that provided feelings of safety and reassurance

My husband had difficult conversations with the hospital midwife who seemed cross and wanted me to go in

I wanted to give birth at home where I feel safe. I was a student midwife but didn't enjoy working on the labour suite so did not want to go back there

We had frustration that any progression in home birth staffing had not been resolved from our first baby to our second.

Giving birth at home is a positive experience

When my second child was born, my first was just waking up and came in to see her sister – it was a lovely experience as a family.

"We had the frustration that any progression in home birth staffing had not been resolved from our first baby to our second"

Home Birth Service

Your Poems

H

earthbreak witnessed

O

ver and over

M

other's spirits destroyed

E

ssential rights ingnored

B

orn at home was the plan

I

rate is how we feel now on behalf of those let down

R

ewinding and therapy will never recover what is lost from
unnecessary hospitalisation

T

rauma passing to the next generation and taken to the grave

H

ow can you allow this to happen?



Written Reflections

What happened?

Unplanned home birth (West Yorkshire , first baby
Was a quick labour- called the hospital and told was too early to come in. When I got there (mum/granny)- baby was visible.

What were you thinking? List some thoughts

- Ok let's crack on
- Hope baby is ok as I've not been listened to

What did you feel? List some feelings

- Calm
- So pleased she had the birth she wanted

What did you do? List some actions

Asked partner to call the paramedics
Delivered the baby

What was good?

- Daughter had nice birth, she was really happy
- Uncomplicated
- Empowering

What was bad?

- Had to go into hospital as it was an unplanned home birth
- Difficult to get discharged from hospital

Home Birth Service

Your Poems

How can we make our service better?

Organised change can be a challenge

More work to be done

Ensuring we meet your needs

But, today we make a promise

Inspired, enthused and encouraged

Realisation that we're all on the same page

The goal for all is safe, individualised care

Home birth, we can make it better together

Personal experiences of Home Birth – one to one discussions

Unable to have a Home Birth

"In terms of a birth, it was perfect for someone but it wasn't for me"



My first pregnancy was a nice experience in water at home. It was surreal in my house that I'd just had a baby. Family came round and were surprised that I didn't look like a woman who'd just had a baby

I was under Obstetric care as my son was diagnosed with cleft lip and palate at 20 weeks so there may be feeding issues. Midwife said a home birth may not therefore be possible, but everyone was person-centred and the Midwife was open to supporting my choice. I valued the relationship and care provided by the Obstetrician and Midwife.

Someone else out there was choosing what my experience would be

When pregnant again, I was anxious – ten birth pools were already booked on my due date and being pregnant in Covid was naff as well – with a weird lockdown bubble that was isolating and a lonely experience

The NUH home birth service was patchy. Had the same Midwife for my first and second pregnancy. But having a home birth this time was out of her control and at the back of my mind I felt that it might not happen.

People say 'it sounds like a good birth' but it wasn't what I wanted!

I rang the hospital but no one was on duty to come. Continuity team would not come as I was not on their caseload and City Hospital was fully booked. QMC said to come in to be checked. They said the pools were reserved for Covid patients. Started to worry and thought about doing my own vaginal exam. Every choice I had made was being taken away. The birth pool was in the house – I should have just got in

Agreed to go to QMC in the car and arrived in advanced labour. Partner knew the baby would come soon.

I could not get early discharge. Midwives were off doing something different.

Told the NIPE was to be done somewhere else but not told where or how. Had to ring for medication follow up, but when I 'popped' in at QMC had to wait and just broke down in tears. NIPE midwife arrived at my home and I was annoyed that I didn't know she was coming.

Glad this experience was with my second and not the first. I felt there has been a culture shift; everyone had time the first time around but no one had time the second time.

Staff never tell a woman at hospital 'go home, we're busy' but it is okay to say we are too busy to home birth women?

In terms of a birth, it was perfect for someone but it wasn't for me.

"Staff never tell a woman at hospital 'go home, we're busy' but it is okay to say we are too busy to home birth women"

How I feel about the Home Birth Service

As part of the Listening Event, attendees shared their feelings about the Home Birth Service by sticking post-it notes on posters tacked onto the wall; 'How I feel about the home birth service' and 'My ambitions for the home birth service'. The post-it notes (below) were anonymous and shared back to the group for discussion.

Feel passionate about having a home birth service. Feel disappointed its always the first things to 'pull' with capacity issues. Makes me feel service is not valued

Disappointed we haven't been able to meet service user needs. Excited for change

I have had a home birth, been a midwife at home births and held space for those planning home births

Hopeful with new plans

Principle offer to women – supporting choice

What home birth service?

Emotional! Our team really want this to happen. Great for women, families and midwives

Cost to the NHS in terms of mental health – being signed off through trauma of not having the home birth wanted

Let down

Excited and impatient

Decisions are based on risks to NHS not individual choices

Ambitions for the Home Birth Service

A sustainable service which meets the needs and wishes of our service users and is a service we can be proud of.

That we can offer a home birth service that is a real choice for women and families

To have a protected, round the clock service

That it is in place for my next pregnancy/birth

To be a success for staff and users

I would like to see midwives coming out of the labour ward to the home birth service, attending doula courses to reinforce the holistic emotional and spiritual aspects of birth so they can respect the space

Sustainable reliable trustworthy proud

Birth can be profound, challenging, unpredictable. It can also be fun and joyful! Hope the team enjoys it as much as the women and families

Sustainable service

Excited and impatient

Continuity team – to feel cared for and supportive. Positivity

Ambitions for the Home Birth Service

To increase our HB rate from <1% to 5% in 3yrs. For this to be our new standard offering and the most popular pathway for patients. For the project to be implemented on time!

To be reliable and sustainable. For every woman who wants a home birth gets one!

Keep computers out of the room whether at home or hospital. Much more distracting than paper for staff and women

A dedicated supported team that are able to supports women's choice to have a home birth. For home birth be an option for anyone who wants one and for improved outcomes that come with this service.

It's good to be ambitious, but it might have to start small and build – let's make a start!

Leaving women baby and family tucked up in bed – their own beds, eating toast and drinking tea. Driving home full of satisfaction at a job well done!

Midwives allowed to wear their own clothes. Uniforms have a them and us feel and can create barriers even subconsciously.

Sustainable successful service with passionate staff and families supporting it

Themes from you

This was the first time for professionals to host a listening event like this where a mix of group discussion, creative materials and the offer of one to one meetings with senior maternity staff were all on offer to gain service user voice. The two post-it-note questions 'how I feel about the home birth service' and 'my ambitions for the home birth service' elicited value-based and emotional responses. This demonstrates a need for value driven service improvements.

Reflecting on all the feedback that was shared with us during the event, the following themes and trends emerged:

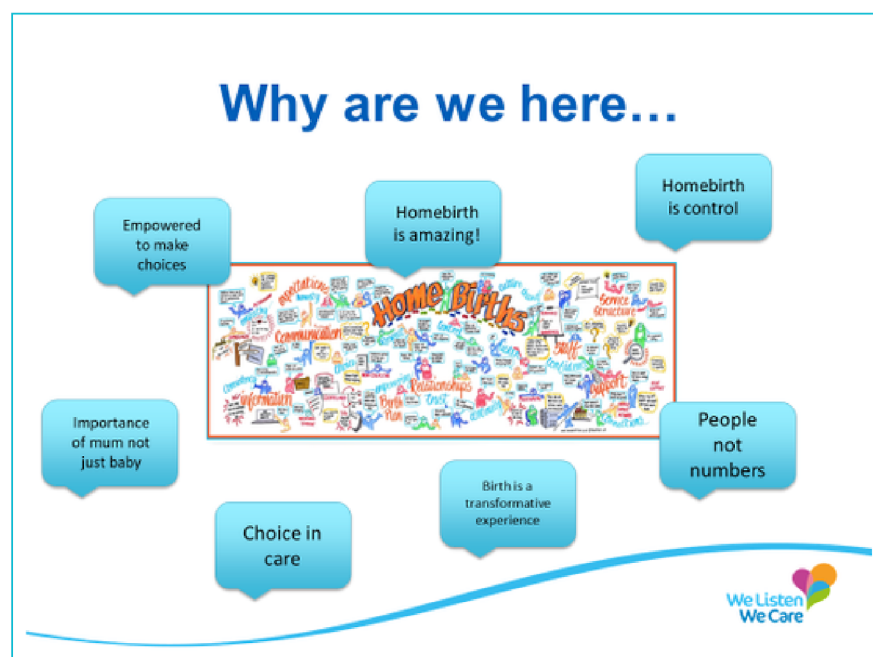
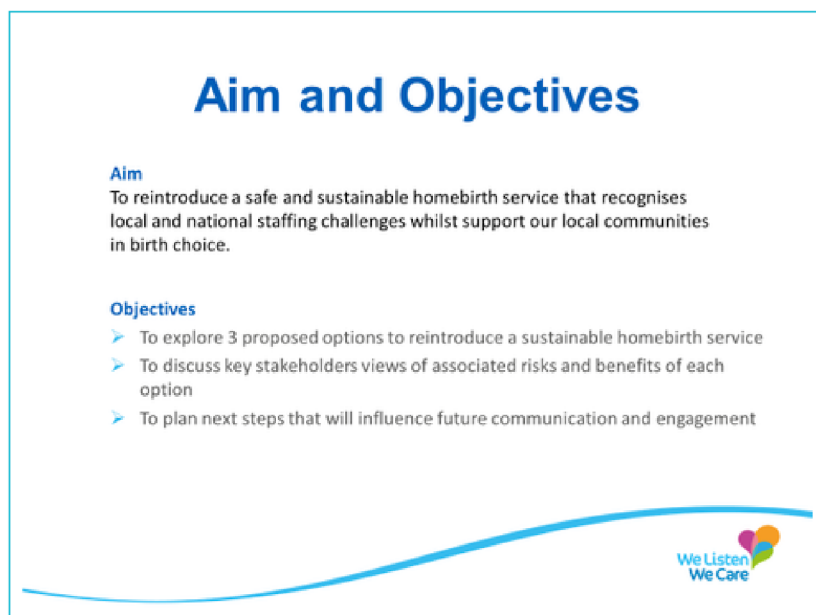
Themes



- That not everyone wants the same birth experience but everyone should have a choice about what birth experience they do want
- That there is a level of excitement about redeveloping the service, but a wariness based on past experiences, that previous expectations have not been met
- The feeling of people using or wanting to use the service, is that it's a service that's often pulled when funding is tight – and people want it to be as much of a priority to sustain as other maternity services
- That it should be offered to all women as a choice – with information to help them make a decision and a dedicated support team who can give information and advice
- The feeling that when the service is not offered it's based on the risk to the NHS not the person
- That this development should be ongoing and be offered well into the future
- That the model must be sustainable and deliverable long term
- That the service is reliable and future proof
- Staff working in the home birth service should not be drawn into other maternity areas as a contingency to other services
- Midwives working on a home birth should not have to wear a uniform – another way of breaking down barriers
- That the new home birth service redesign should start small but grow and develop effectively until it is a bigger service
- Staff and people who use the service are passionate about the redevelopments.

Home Birth relaunch presentation

This slide presentation was given by Becky Wardle, Community Midwifery Manager at the Home Birth Listening Event. This presentation was about the relaunch of the Home Birth Service, it discussed the aims and objectives of the transformation with a number of options.



Options Appraisal

Option 1

Do nothing. Currently the Community Midwifery Service rosters home birth shifts within its core community roster. These shifts are currently 2x early (08:00-16:00), 2x late (12:30-20:30) and 2x long night (19:00-07:30). Often these shifts are not covered by the core team due to capacity, with the night shifts almost never being covered resulting in the home birth service being suspended overnight and women supported to deliver in hospital.

Option 2

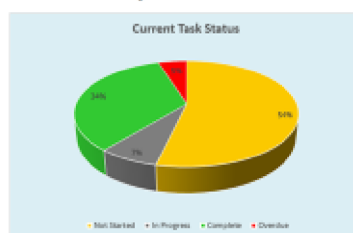
Micro Team Model. Phase 1: To commence with a small scale home birth team by recruiting 4 WTE Midwives to provide 24/7/365 home birth service for a limited caseload. A 'Request for UMMS Transformation Funding' for £47,558 in order to provide Midwives with a 15% salary enhancement to account for out of hours and on-call work for a period of 18 months. Phase 2: The service will utilise a Band 4 Midwifery Support Workers to be the second attendant at home births, and increase the establishment of the home birth team in addition to the Midwives in phase 1. This would be implemented post September 2024 when the MSW's have completed their qualifications.

Option 3

Dedicated 24 hour homebirth team (preferred option). To establish a dedicated 24 hour community home birth team. The team will provide antenatal, intrapartum and postnatal care for women planning home births to be carried out in clinics or the patients' homes. The planned initial roster for this service is 2x long days (07:00-19:30), 1x day (09:00-17:00) and 2x long nights (19:00-07:30), with a view to expanding the servicing as required in line with demand utilising vacancies. To explore in the future the role of a B4 at NUH



Home Birth Project



There are
53
tasks in total within this project

Number of working days remaining in the project: **100**

The project team has
27
tasks outstanding

This project is
26%
complete

The project team has completed
14
tasks

Current Workload

Project Member	Task Status			
	Not Started	In Progress	Complete	Overdue
Becky	4		5	
Whole project team	5		5	
Jess	1	1	5	
Becky/Band 7s	4	1		1
Corinna			1	
Jana/Becky	2		1	
Band 7s	2	1		
General/Jess				
Paul	2			
External	4			
Becky/Band 7s/MSW	1			
Becky/HR	1			

This project has
0
open risks and
0
are rated 9 or above



Introducing the Professional Midwife Advocacy Support

Professional
Midwifery Advocates



The Professional Midwife Advocates delivered a presentation to the group about their service.

HOW CAN THE PMAs OFFER SUPPORT ?

Listening and advocating on concerns women may have about their current maternity care where there may be conflict of choice. Supporting care choices, particularly those that wish to have a birth experience outside the trust guidelines.

Provide a birth reflection and planning service. (Birth reflection and planning is a one session only listening service. It is not a counselling or trauma informed service).

Empowering midwives to support women with pregnancy and birth planning.



Suitable referrals

Wanting to gain clarity around previous experience

Traumatic previous experience

Birth outside of guidance that requires complex birth planning

Women with complex pregnancies requiring complex birth planning



Unsuitable referrals

Women choosing to have an ELSCS and are supported in their choice/require no birth planning

Medical and neonatal debriefs

Women who have made an informed birthing choice and do not require complex birth planning

For more information, please contact the PMA team on
AskAPMA@nuh.hs.uk

Reflections on the Event

What worked well ?

The listening event highlighted the strength of working in collaboration – Feedback after the event confirmed that the attendees felt it was worthwhile attending and it was a success that Midwives, Doulas, Parents, Integrated Care Board Teams and Senior Leaders could draw on each other's skills and experience as they discussed the home birth redevelopment plans.

There was consensus between service users and professionals in their passion and commitment to develop and evolve the service and people agreed that they want the same thing- a compassionate and effectively maintained service.

The use of a coproduction approach , where attendees shaped the agenda on the day helped to break down barriers and gave the opportunity for honest conversation. Independent facilitators and a range of different methods to capture feedback/stories and engage discussion were a success. Facilitators were able to be flexible with the agenda to meet the needs of the group on the day.

Creative tasks for people to share their experiences were really engaging with high take up by both staff and parents. The activities were enablers of openness, honesty and drawing out true reflections. They supported people to share when they are not confident to speak up.

The Listening event offered an opportunity for staff to reflect on the home birth service and their own experiences of not being able to support women when they want to.

The event enabled networking and links to be made. For instance, a Doula was talking about the great home birth service in Leicester and realised that the new in post Head of Midwifery, who was present, was responsible for the Leicester service in her previous role.



Reflections on the event



Staff were really positive following the one to one sessions that they were previously anxious about. The event created an environment where staff could be vulnerable, upset and brave to also share their experiences

Parents felt validated that senior staff members gave time and that they valued hearing the voices of our women.

Sharing the process and planning for a new home birth service at this early stage was welcomed by the parents. They were given opportunities to ask questions and be involved in the journey.

What could have been better ?

Attendance – there were more staff present at the event than parents,.

Recommendation for future events:

- Run two sessions instead of one long session or provide a lunch for a longer session
- Provide a creche
- Increase promotion and awareness of the event
- Share the report from this event to increase awareness

Representation – there were no Dads present and no people from the BAME communities.

Recommendation for future events:

- Provide a creche so both parents can attend
- Increase awareness of the Home Births Service project with diverse communities
- Promote the next event to key staff and stakeholders working with diverse communities.

Evaluation

As part of the evaluation of the session people were asked to compare their feelings before the session to their feelings after the session. 11 out of the 12 people who completed an evaluation reported that the session had changed their feelings in a positive way about the Home Birth redevelopment plans.

How did you feel before this session?	How did you feel after the session?
A bit anxious about how the day was going to go. Worried that families feel we are not pro home birth – I am very passionate about home birth	Useful, I completely understand why our service users feel so disappointed/devastated home birth has not been an option for them
Apprehensive. I felt nervous about talking about my own experience and how this would be received.	
Apprehensive	Uplifting, optimistic
Anxious, worried	Empowering/encouraging. Sad at failings. Enthused at comments and potential to grow and evolve change
Nervous but excited. Something new but much needed	Educational. Optimistic
Slight trepidation – would it be collaborative or an opportunity to criticise?	Excellent, Excited & enthused. All on the same page
A bit nervous: wanted to ensure our guests left comfortable and able to share. Worried that they would have a poor perception of NUH and that we don't share the same goals and passion to change.	Consolidating, Excited about the future and pulling our plans into place. Inspired by the stories i've heard and confirms we're on the right path

Evaluation

How did you feel before this session?	How did you feel after the session?
Unsure of what to expect. Looking forward to hearing of change as interested in patient experience	Collaborative. Excited for change
Sceptical	Hopeful Emotional
A little bit like what is the point in another session – surely NUH know how women feel by now? But hopeful nonetheless and interested to hear about the future plans.	Valuable. Plans sound good. Thank you for opportunities to share
Nervous, anxious about what was to come	Fantastic! Positive of the service moving forward
Disengaged, angry, disappointed, disheartened	It was validating to see staff make an effort to attend and to acknowledge the loss from my experience Hopeful and excited for future users of the service

"It was validating to see staff make an effort to attend and to acknowledge the loss from my experience"



10 Next Steps

The next steps for this work were agreed collectively by the group at the end of the Listening Event.



01. Share the Draft Report

It was agreed that the draft of this report would be circulated to the group for comment and agreement before being published.

02. Hold a 6 month check-in and October 2023 Event

The group are keen to build on the relationships established at the event and to keep the communication channels between staff and parents open. NUH Maternity Services will organise a check in with people in 6 months-time to compare baseline feelings of 'how I feel' then and now and another listening event will take place in late October before the new home birth service is launched.

03. NUH to map out transformation stakeholders

To maximise the number of people involved in their transformation journeys, NUH are to carry out an exercise to map out all their Stakeholders- the key people who need to be involved in their transformation work.

04. Establish mechanism for ongoing involvement - Patient Reference Group

To maintain the connections established at the listening event, NUH will establish a mechanism for ongoing communication and engagement with parents and families and staff about the Home Birth Service. A mechanism for capturing feedback and experiences of staff and service users will also be established, this information will then be used as part of the service transformation approach. Create a patient reference group to build on this start to connectivity and to keep people informed. Plan ways to share the creative learning, how to do it, how it went.

05. Home Births data to be shared

Parents asked for the current data on home births to be shared after the listening event. There were some specific questions: how many were planned? how many happened? Reasons for not going ahead etc. They would also like to have comparative data from before Covid, comparative geographical data and the home births tracked against birth rate. This is to be arranged by NUH.

06. Prioritise postnatal care

The group would like Postnatal care to be prioritised for the home birth team for when births do not go to plan or expectations have not been met and that this needs to be considered within any service transformation plans.

07. Raise the profile of the Professional Midwife Advocates

The group felt that it would be beneficial to raise the profile of the Professional Midwifery Advocates because that service is not widely known about. It was a recommendation that NUH could advertise this service more widely using partners including the Nottingham and Nottinghamshire Maternity Voices Partnership ~ (MVP), Health Visiting, NUH communications teams, Badgernet, Patient Advice & Liaison Service (PALS) and Patient Experience Teams.

08. Share the outcome of this event widely

The group reflected that it would be helpful to share the outcome of this event widely, particularly in medical journals and publications.

09. Use women's stories for training and development

The group reflected on the powerful impact using a real case study can bring to service improvement and transformation. It was recommended that a plan should be made to establish a way of routinely capturing stories and then use this insight in this way. Case studies would also make student training more real and have a powerful impact on staff and in turn people's experience of using the service.

10. NUH to hold more events like this

The group felt that this listening event was beneficial to parents and staff. A recommendation is that more events like this should take place for different aspects of maternity services. There is going to be a new dedicated engagement role within the NUH maternity service and it was a recommendation that this role carry out similar events regularly.





**Thank you to everyone who contributed
their thoughts and experiences on the
day.**

**Thank you to all the presenters on the
day and to the facilitators and
organisers.**

Would you like to be involved in the future ?

If you would like to be involved in the ongoing development of the Home Births Service or if you would like to be a part of the new Patient Reference Group for the Home Birth Service please contact Becky or Elaine using the email addresses below.

You may also wish to join our Friends of Nottingham Home Birth Group, you can find the group on Facebook search for the Nottingham Home Birth Group.

The group meets at the Nottingham Deaf Society NG7 4EQ, on the THIRD FRIDAY of every month between 09.30-11.30 am



Contact us

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Elaine Broughton**

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