

PLANNING A BIRTH AT HOME OR IN A COMMUNITY BASED MIDWIFERY LED BIRTH CENTRE:

INFORMATION ABOUT AMBULANCE SERVICES

**WE HOPE YOUR PREGNANCY AND
BIRTH IS HEALTHY AND POSITIVE. IF
YOU HAVE AN EMERGENCY, **CALL
999**. THE AMBULANCE SERVICE IS
HERE TO HELP.**



This leaflet is for people giving birth and their support people.

This leaflet explains:



how to get ready for a home birth



what the ambulance service will do



what to expect if you need emergency help

**PLEASE SPEAK TO YOUR MIDWIFE
ABOUT YOUR PLANS AT YOUR
APPOINTMENTS.**

CALLING AN AMBULANCE TO A BIRTH

The ambulance service is for emergencies. It should not be used instead of routine maternity care. As soon as you know you are pregnant we recommend that you contact your GP, local maternity hospital or self-refer online.

An ambulance cannot be booked in advance. Ambulance clinicians cannot wait outside a home or birth centre just in case you need them.

Ambulance clinicians are trained to help in emergencies. If they are called by midwives to attend you, the ambulance clinicians will work with the midwives to give emergency care and take you to hospital, if needed.

The ambulance service is here for everyone. If you are a tourist, migrant, refugee or asylum seeker, do not be worried about calling an ambulance. The ambulance service is free of charge in an emergency, regardless of immigration status. You can expect respect and dignity from the ambulance service regardless of your race, background, ethnicity, sexual orientation, gender, religious beliefs, disability, job, income, living situation, family, spoken language, age, gender or marital status.

RESPONSE TIMES

A "response time" is the time taken for the ambulance service to get to you after you call 999.

Here are the national **target** response times:

Category of call	National TARGET Response Time	Example situation
Category 1 incidents (immediately life-threatening emergency)	In 9 out of 10 times, we aim to arrive by 15 minutes	A baby is not breathing
Category 2 incidents (other life-threatening emergencies)	In 9 out of 10 times, we aim to arrive by 40 minutes	Your labour is not progressing as expected

Response times **cannot** be predicted in advance. The targets above cannot always be met.

Response times vary based on:

- How busy the NHS is at the time of your call
- Incidents taking place at the time
- Your location

An ambulance clinician in a car may arrive first to assist you before more help arrives.



TRANSFER TIMES

A "transfer time" is the time taken from when the ambulance arrives to the time you get to hospital. Transfer times **cannot** be predicted in advance.

Transfer times vary based on:

- Any treatment you need before leaving where you are
- How easy it is to get into the ambulance
- Distance to the hospital
- Traffic and weather on the roads at the time

WHICH HOSPITAL WILL I GO TO?

You will be recommended to go to the closest hospital with maternity services, even if it's not the one you're booked with.

If you or your baby need to be transferred to another hospital at any point, this will be discussed with you and arranged.

GETTING READY FOR A HOMEBIRTH (CHECKLIST)

We recommend that you do the following to get ready for your homebirth:

- ☐ Make sure you and your birthing partner(s) know the number to call for a midwife.
- ☐ If you have a smartphone, download the **"What3Words" app**. Note down the three words that are for your address. Make sure you, your birthing partner(s) and midwives know your postcode and the what3words.
- ☐ Pack a small overnight bag in case you need to go to hospital by ambulance.
- ☐ If phone signal is poor, use Wi-Fi calling or plan another way to contact 999.
- ☐ If you are deaf, register your phone on www.relayuk.bt.com so that you can call 999 via text. You can also use www.999bsl.co.uk.
- ☐ Make sure the way out of your home is clear.
- ☐ Make sure your property number or name is easy to see.
- ☐ If you have other children or pets, make a plan for who will care for them if an emergency happens.
- ☐ If you have cultural or religious needs, please write a list for the ambulance service.

Please speak to your midwife in advance so they can help support you if:

- you have a disability or particular learning needs
- you have any communication problems
- you have mental health concerns, including anxiety
- you have had a previous traumatic experience of needing emergency care
- you feel unsure about calling 999



IF YOU NEED TO CALL 999 BEFORE THE MIDWIFE ARRIVES

If you need an ambulance before midwives arrive, call 999. Do not call 111. Put your phone on loud speaker. If you need an interpreter, please ask for one. Every effort will be made to arrange one.

The person that answers the 999 call is a "call handler". They are not a clinician. The questions you are asked will not delay help being sent.

1. The call handler will ask if the patient is breathing

2. The call handler will ask what has happened

Clearly tell them the reason you have called 999 and how many weeks pregnant you are.

Clearly tell them if:

- You have any medical problems
- You have had problems in this pregnancy or past births

3. The call handler will ask what the address is

Clearly tell them about your address: Any entry codes
The words from your "What3Words"
Any special information, for example, "we live above the Tesco Express".

4. The call handler will ask further questions. This is not delaying help.

5. The call handler may give you advice.

This may include turning lights on and unlocking your door.

If the call cuts off or things change, call 999 again anytime.

A clinician in the control room might call you to ask more questions.

WHEN THE AMBULANCE ARRIVES

Ambulance clinicians may arrive in more than one vehicle to make sure both you and your baby get the care you need.

You can expect kind and safe care, but not all birth preferences or plans can be followed in an emergency.

Please tell the ambulance clinicians if you have any cultural or religious needs. For example, certain religious clothing.

You may be attended by male and/or female ambulance clinicians.

Please have your maternity notes and any medicines ready for the ambulance clinicians.

Ambulance clinicians have different skills to midwives—for example, they can't check your baby's heartbeat or do internal checks.

Ambulance clinicians are not trained in water births. If your midwife isn't there, you'll be asked to leave the pool or bath for your safety.

If the ambulance clinicians are no longer needed, they will leave. If something changes and you need them, call 999 and they can come back.

WHAT IF MIDWIVES ARE NOT AVAILABLE?

The ambulance service will recommend that you go to hospital in the ambulance if:

- You are in labour and a midwife cannot come
- Your baby has been born and a midwife cannot come
- The ambulance clinicians have any worries about you or your baby before a midwife is there

This is because the ambulance clinicians cannot do all the recommended checks on you and your baby.

The ambulance service will discuss all decisions about transfer to hospital. We will discuss your medical needs and your wishes with you. The ambulance clinicians will explain the risks and benefits of different options.

GOING TO HOSPITAL BY AMBULANCE

If a midwife is with you, they will usually come in the ambulance too.

Your baby needs to be secured in the ambulance. The ambulance clinicians will advise you on the safest way to do this. Mostly babies travel in a harness provided by the ambulance service. The harness will be attached to the stretcher.

Your baby cannot be skin-to-skin when travelling in the ambulance because it is not safe. Your baby will need to have the cord clamped and cut before travelling.

A baby can only be put in a car seat if this is the advice of the ambulance clinicians looking after you.

It is likely that you and your baby will need to travel in separate ambulances because we can only safely monitor one patient in each ambulance. The ambulance clinicians and midwives will make sure you are back together as soon as possible.

A partner, family member or support person can usually travel with you and/or the baby. Sometimes your partner, family member and support people need to make their own way to the hospital.

USEFUL LINKS

Information on safe travel in ambulances
(<https://aace.org.uk/safeintheback/>)

Ambulance Response Programme NHS guidance
(<https://www.england.nhs.uk/urgent-emergency-care/improving-ambulance-services/arp/>)

Information on choosing where to give birth – NHS
(<https://www.nhs.uk/pregnancy/labour-and-birth/where-to-give-birth-the-options/>)

ACKNOWLEDGEMENTS

Thank you to the many women, birthing people, families, staff and organisations that have provided input and feedback on this leaflet.

Authors: Camella Main, Kerrie Wykes, Bethan Jones, Damon Wheddon, Stephanie Pearce and Susan Rhind.

Collaborators: Royal College of Midwives, College of Paramedics, Royal College of Obstetricians and Gynaecologists and National Prehospital Maternity and Newborn Care Group



THANK YOU FOR READING THIS LEAFLET, WE HOPE YOU AND YOUR BABY HAVE A HEALTHY AND POSITIVE BIRTH.