**Choice of place of birth**

**Can I choose where to give birth?**

Yes. The law protects your right to decide where you give birth.

The legal principle of consent means that you cannot be compelled to give birth in any particular location or medical setting against your will, so long as you have mental capacity to make your own decisions. See our factsheet, *Consenting to Treatment*.

**Do I have a right to choose hospital care?**

Yes. All women in the UK are entitled to maternity care in hospital. In some circumstances, women who are not resident in the UK will be charged for their care, but it cannot be withheld from them if they cannot pay.

You will be told by your GP which hospitals provide maternity services in your area. If you do not wish to attend one of these hospitals, you can self-refer to your chosen hospital if your GP will not refer you. Self-referral forms are usually available on the hospital's website or from its maternity ward.

If you are told that you cannot access your chosen hospital because you do not live in the right area, you can make a request to your local Clinical Commissioning Group, Health Boards in Scotland and Wales or Local Commissioning Groups in Northern Ireland. They will usually have a policy on requests for care outside their boundaries, which may limit the services that you can access, but they should consider your request based on your personal circumstances and consider making an exception to their policy.

**Can I choose to give birth in a birth centre?**

All NHS Trusts are expected by the Department of Health to make birth centre services available to women in their area. According to Department of Health guidance issued to the NHS in England, women's choice of place of birth, whether in hospital, in a birth centre or at home, should be a 'national choice guarantee'. The Scottish Health Executive, the Welsh Government and the Northern Irish Department of Health have the same expectations of maternity services in their areas.

There are still some areas in which birth centre facilities are not available. If this is the case where you live, you can ask your GP for a referral at any point in your pregnancy or self-refer to a birth centre in a nearby area.

Birth centres will usually have an admissions criteria which restricts 'high-risk' women from using the birth centre. These criteria are not legal rules and should only be used to guide the decision about who can access birth centre services. Any decision to refuse a woman admission to a birth centre must be backed-up by evidence which supports the decision. For example, if a woman is refused admission because of a particular risk factor in her pregnancy, there must be clear clinical evidence that additional risks may arise during the birth that cannot be safely managed in a birth centre.

When a midwife considers whether a woman is suitable for birth centre care, she should always take account of the woman's individual circumstances and consider making an exception if she does not fit the criteria. If the woman is not admitted to the birth centre, midwives should consider how to accommodate the woman's birth choices in the obstetric ward and adapting the environment to meet her needs.

If you are struggling to find support for your decisions, you should contact the Head of Midwifery at your hospital. You can draw her attention to NHS England’s guidance on

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midwifery supervision, which requires all midwives to advocate for women’s rights in childbirth and to support women who make decisions outside the maternity provider’s guidelines.

**Do I have a right to home birth services?**

You have a right to decide where you give birth and you cannot be forced to attend hospital. While there is no legal guarantee of a home birth service, the Department of Health guidance, Scottish and Welsh guidance issued to the NHS states that home birth services should be made available to women by all NHS Trusts and Boards. The NHS Choice Framework 2016 for England states that women can expect to have a choice of home birth. In addition, NHS England’s guidance on midwifery supervision states that maternity providers should put in place appropriate support for women’s choice of home birth.

If staffing shortages are given as a reason for refusing your choice of place of birth, a hospital can be expected to have contingency plans in place (such as contracting with an independent provider) to ensure that there are enough staff to provide the services it has promised. In a recent case, the NHS Ombudsman accepted that an NHS Trust that refused to make contingency plans after it suspended its home birth services was acting unreasonably.

**Are midwives obliged to attend home births?**

Midwives are under a professional obligation in the NMC Code to put the interests of the women they care for first and make their safety their main concern. Midwives should respect a woman’s decision to give birth outside hospital and attend a woman at home if requested, regardless of whether they agree with a woman’s choice.

If you contact the hospital in labour and you are told that a midwife is unavailable to attend you at home, you (or your birth partner) can ask to speak to the Head of Midwifery and request that a midwife is provided. You cannot be forced to attend hospital.

If a healthcare professional has breached their duty of care, they can be referred to their regulatory body. See our factsheet, **Making a Complaint**.

**Can I still give birth at home if my pregnancy is ‘high-risk’?**

You are responsible for making your decisions about where you give birth. Your decision cannot lawfully be overridden by anyone else, unless you lack mental capacity to make decisions about your healthcare. See our factsheet, **Consenting to Treatment**.

If you are advised against giving birth at home, you cannot be compelled to attend hospital. Your midwife and hospital consultant, if you have one, should work with you to put in place a care plan that respects your decision to give birth at home.

Healthcare professionals must present information about birth choices in an unbiased and objective way. If a woman has made a decision in response to coercion or threats, including the threat of involvement of social services, she may not have given her consent to treatment, and the healthcare professional may be legally liable for failing to obtain consent. See our factsheet, **Social Services and Maternity Care**.

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**Disclaimer:** Our factsheets provide information about the law in the UK. The information is correct at the time of writing (April 2017). The law in this area may be subject to change. Birthrights cannot be held responsible if changes to the law outdate this publication. Birthrights accepts no responsibility for loss which may arise from reliance on information contained in this factsheet.