

## Pregnancy - birth choices

When you're pregnant or planning a baby, you have a number of choices about where to give birth and who you would like to care for you during this time. Carers may include a midwife, a GP, an obstetrician or a combination of all three. It's a good idea to talk to health professionals, as well as family and friends, about your options and what to expect from the different types of care.

### Care in all stages of pregnancy and birth

It's very important for you and your baby to be looked after from the start of your pregnancy until after the birth of your baby. Care should include providing support and information, monitoring you and your baby's health and wellbeing, and identifying special medical or personal needs that may require extra help from trained professionals.

The types of care that is given include:

- **Antenatal care or care during pregnancy** – This can be with a midwife, GP or obstetrician. Regular appointments are important to monitor your pregnancy including both your and your baby's wellbeing.
- **Intrapartum care is care during your labour and birth** – If you are a public patient, midwives will provide most of your care during labour and birth. If you are a private patient, your midwife will support you and, along with your obstetrician, will help you understand what is happening, assist you in making choices about pain relief, and discuss any medical interventions and special care needs with you.
- **Postnatal care is the care you receive after the birth of your baby** – In most hospitals you will be transferred from the birth suite to the postnatal ward an hour or two after your baby is born. Midwives will provide the majority of your postnatal care and a doctor will check on your progress. Midwives also offer support for breastfeeding and looking after your new baby. They will discuss with you what you can expect as a new mother and what is normal.
- **Domiciliary care** – Midwives may also visit you and your baby at home. Public patients may be eligible for one or two visits after they leave hospital. Private patients should check with their maternity hospital and their health fund for service eligibility and coverage.

### Choosing the type of care

There are many things to think about when deciding where to have your baby and who should care for you. Things that may affect your decision include where you live (all options may not be available in your district), your health and life circumstances, previous experiences of pregnancy or birth, and your feelings about particular types of care. It may also depend on whether you are a public or privately insured patient.

Some rural hospitals do not offer antenatal or birth care; you would go to a larger hospital for the birth and receive postnatal and home visiting care from local services.

During your pregnancy, you will have time to explore all your options with the help of your carers. You can change your mind if you find the choice you have made is not appropriate for you.

### Public hospitals and midwives' clinics

Choosing to have a baby as a public patient means:

- You attend an outpatient clinic at the hospital or a community-based centre accredited by the hospital.
- You may be cared for by doctors or midwives depending on the level of care you need.

- You will be cared for by a hospital midwife in labour and during birth. A doctor will only be present at birth if extra medical care is needed. You are not able to choose the doctor who attends the birth
- If a doctor attends the birth, the attending hospital midwife will continue to provide care for you.
- After leaving hospital, a hospital midwife may visit you once or twice at your home, or you may visit your GP.
- You are encouraged to see your GP six weeks after the birth of your baby. If you don't have a GP, it is a good idea to try and find one you are comfortable with before you have your baby.

### **Private care means that:**

- You choose your obstetrician.
- Your antenatal check-ups will take place at their private consulting rooms.
- You will be cared for by a midwife in labour. Your midwife will be in constant contact with your obstetrician and will contact them to come in to assist with the birth of your baby.
- You can go to a private hospital or to a public hospital as a private patient.
- It is a good idea to check that your private health insurance provides sufficient cover for unexpected costs such as anaesthetist, theatre, or as a private patient in a private hospital.
- Some private hospitals offer home visits once you are discharged.

### **Birth centre care**

Birth centres operate on the basis that pregnancy and birth are healthy life events, and that for most women there is little need to intervene in the birthing process. If you require a different level of care during your pregnancy or labour, your midwife will arrange a transfer of care for you.

Birth centre care is available to women in both the public and private systems. Individual birth centres vary in the way they operate, but they generally emphasise family-centred care. You usually stay at the centre for 24 hours after the birth. After the birth, a midwife may visit you once or twice at your home, or you may visit your GP.

### **Shared care**

Shared care means that your local GP or a midwife from the community may share your antenatal care with the midwives and/or doctors at the maternity hospital. Your maternity hospital will have a list of GPs and midwives that are credentialed and are able to provide shared care with their service.

Shared care arrangements include:

- Your GP or midwife cares for you during pregnancy and after the birth.
- You only visit the hospital at specified routine stages of your pregnancy and for the birth.
- The hospital midwife will care for you during the labour and birth.
- In some health services, the GP attends the birth. However, the hospital midwife will continue to care for you during your labour and birth.
- Midwives at the hospital and some community health centres also offer childbirth education classes.

### **Planned home birth**

A small number of GPs and midwives attend home births. A home birth takes place in familiar surroundings and gives you the most involvement in decisions that affect your care. In Victoria, care is provided by a midwife contracted through Midwives in Private Practice (MIPPS).

For a home birth:

- Pregnancy care is provided in your home, or a location chosen by you and your midwife.
- During labour and birth your contracted midwife cares for you in your home.
- You may choose to have a second midwife or an obstetrician/GP attend the birth.
- Your contracted midwife provides postnatal care in your home.

- If you need to be transferred to hospital during the birth, your GP or midwife can come with you, however the decision making for your care will be transferred to the hospital staff.

## The costs of having a baby:

The costs depend on whether you are a public or private patient. For example:

- As a public patient you do not pay for the doctor, midwife or hospital.
- Private patients pay for their doctor and hospital – Medicare and private health insurance will meet some of the costs of your care. It is a good idea to check your private health insurance provides sufficient cover for unexpected costs.
- As there may not be pregnancy care available at some rural hospitals, it may be necessary for you to have your care during pregnancy provided by the local GP. Some GPs will bulk bill – if not, you may have to pay the difference between their fee and the Medicare rebate.
- You will have to pay the midwife for a home birth, unless your health fund provides cover for midwifery care. Other home birth costs may include attendance of an obstetrician or GP at the birth and fees for ultrasounds and pathology tests.
- If you are transferred to hospital during a home birth, you will have to pay for this cost and the hospital costs if you go to a private hospital.

Costs may vary between practitioners when it comes to antenatal care, including ultrasounds and pathology tests. Many of these costs are partially covered by Medicare. There may be an extra cost for antenatal childbirth education classes. Check with your GP, midwife or obstetrician about any services that you may need to pay for.

## Care for women with extra needs

During your pregnancy you may need additional care. Your needs may be medical, cultural, social or emotional. If this is the case, you may receive your pregnancy care from specialised staff located within the hospital or community setting. For example, you may need:

- close monitoring of you or your baby
- the services of an interpreter
- financial or accommodation assistance
- home-based support
- support for mental health conditions including drug or alcohol addiction.

## Where to get help

- Your doctor
- Specialist staff – obstetricians, midwives, social workers, dieticians
- Community health centres
- Birthing centres
- Hospital maternity units and midwives
- Centrelink
- Midwives in Private Practice (MIPPS) Tel. (03 9687 8052
- Victorian Government Health Information Tel. 1300 650 172 or (03) 9096 0000

## Things to remember

- The earlier you consider the options for your care in pregnancy and birth, the better.
- You must be at low risk of complications to use a birth centre.
- The time you spend in hospital after the birth depends on your needs, but may be quite short.
- There may be extra costs for antenatal investigations and childbirth education classes.
- If you need an interpreter, ask the organisation you are dealing with to arrange this.
- More information about childbirth is available free from the Victorian Government Health Information website.

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