1. Local learning re maternity terminology

KRSCP held 2 rapid reviews in 2022. Both of these babies had been born at home, however the circumstances of their births were both different. It became apparent that professionals (including health professionals) often misinterpret the type of birth a woman has which can subsequently result in safeguarding concerns not being identified and acted upon. Further reading:

https://www.rcm.org.uk/media/3923/freebirth_draf t_30-april-v2.pdf

https://www.all4birth.com/factsheet-born-before-arrival/

7. Freebirth Safeguarding considerations: It is not appropriate for healthcare professionals to refer a woman to social services with concerns about the unborn baby, solely on the basis that she has declined medical support, as she is legally entitled to do (Birthrights, 2017). Consider reasons for Freebirth – tokophobia, mental capacity, mother's choice.

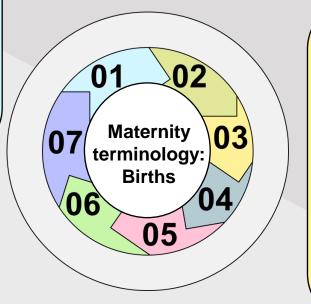
6. Freebirth/Unassisted Birth

- This is when the mother intentionally gives birth without a midwife or doctor present.
- Some women may choose to access antenatal care, others will choose not to access any antenatal care.
- Freebirth is not illegal however, it is a criminal offence for anyone other than a midwife/doctor to perform midwifery functions.

2. Home Birth

Planned delivery at home, normally under the care of a specialist Home Birth Team, have accessed antenatal care.

Safeguarding considerations: normally no different to other pregnancies.



3. Born Before Arrival (BBA)

- Birth that happens away from a hospital or birth centre setting, prior to the arrival of a midwife or medical professional.
- This is mostly due to precipitate (very quick) labour and is more likely to happen with second and subsequent deliveries. Often the mother will have had a quick labour previously. Normal antenatal care will have been accessed. Mother and baby will normally be transferred to hospital (maternity) after delivery.

5. Concealed pregnancy

The mother deliberately conceals she is pregnant from professionals and sometimes their family.

Safeguarding considerations – Professional curiosity is key - teenagers, exploitation, previous child protection/child removed from parents, mental health/learning difficulties, domestic abuse, sexual abuse, rape.



Kingston and Richmond Safeguarding Children Partnership

4. BBA safeguarding considerations:

Is there any suspicions/concerns that mother could have chosen to deliver at home?

Consider - coercive control, domestic abuse, mental illness. Is mother or her partner refusing admission to hospital? Access to antenatal care.