Position statement

One-to-one midwifery care in labour

Government policy for maternity services in England\(^1\) contains a commitment to ‘continuity of midwifery care [which] will include … providing individual support to women throughout their labour and birth’; the Keeping Childbirth Natural and Dynamic (KCND) programme in Scotland\(^2\) supports one-to-one care during first and second stages of labour; and the National Service Framework for Children, Young People and Maternity Services in Wales\(^3\) sets a standard for ‘Women to receive one-to-one care (one woman receiving the dedicated time of a midwife) once labour is established’.

NCT supports these policies and a style of care for women, whether they are perceived to be at high or low risk of complications, where during pregnancy they can get to know the midwife who is likely to look after them in labour. If this has not been possible, it is highly desirable that one midwife carries out the care so that the woman and her partner are not required to meet and form relationships with strangers once labour is established.

When the Healthcare Commission carried out a survey in 2007, they found that 26% of women ‘were left alone during labour at a time when it worried them to be alone’.\(^4\) The NCT expressed concern at that time and urged NHS trusts to ensure that midwives spend as much time as possible on one-to-one care and support.

The advantages of continuous, one-to-one care during labour are numerous, and they include:

- Consistent, sensitive, non-intrusive support and encouragement for the woman in labour, where the midwife knows her wishes and her planned approach to the birth, without having to ask questions or require the couple to repeat explanations
- The maintenance of a quiet and private environment, without the disruption of people coming and going, where the woman’s labour can progress without distraction and she can concentrate on her own capacity to give birth spontaneously without pharmaceutical pain relief and intervention
- In the unusual event of a complication arising during labour, a midwife familiar with the progress of labour and the woman’s reactions will be more easily able to detect problems, discuss any need for referral or intervention with the woman and her partner, and if necessary take such action
- A reduced chance of infection for mother or baby as the number of attendants is kept to a minimum.

NCT urges health services to implement fully the national policies of maternity care that have continuous, one-to-one support in established labour at their heart. The investment in this area will result in more normal births, a reduction in invasive and expensive intervention, greater satisfaction for both mother and midwife, and higher breastfeeding rates as women come through the birth experience feeling empowered, well supported and confident to care for their babies.
References


