

We understand choosing the right care provider and place to birth your baby can be confusing and overwhelming – your midwife or GP can support you to choose the right option for you.

When deciding on your pregnancy care provider it is important to consider: location; cost (including level of insurance cover); pregnancy risk; levels of continuity of care; and whether your care provider's philosophies align with your own.

We hope our summary below of the options within South Australia helps with your decision making.

WHO CAN I SEE FOR MY PREGNANCY CARE?

PUBLIC HOSPITAL CARE

Delivering in a Public Hospital would be the most commonly chosen option. If you have a Medicare Card, there are no fees to pay for visits to the hospital, nor for the delivery. There may be out of pocket costs for ultrasounds. If you choose to deliver in a Public Hospital, you will be zoned to a particular birthing hospital based on your post code.

Each public hospital offers different models of maternity care. Depending on the hospital and the risk level of your pregnancy, your care options may include:

- *GP Shared Care*

We delight in being able to provide care during this special time. All of our GPs are Obstetric Shared Care providers in South Australia and therefore are able to provide care during your pregnancy in conjunction with major birthing units.

Additionally, Dr Andrew provides intrapartum care at Mount Barker Hospital on a rostered basis. Dr Smith, Dr Andrew and Dr Gibbs hold Advanced Diplomas in Obstetrics and are able to manage more complex antenatal care.

Your birthing hospital will ask you to attend a triage or booking appointment around 14-20 weeks. Depending on your clinical needs, your GP will provide the majority of pregnancy care, but you will see the hospital for some of your pregnancy appointments (usually 20 weeks, 36 weeks and 40 weeks).

During labour and/or birth, you will be cared for by the hospital's midwifery and medical teams. After the birth of your baby, your GP would like to see you for a 2 and 6 week check. This option provides excellent continuity of care for your pregnancy appointments and post-natal care (and beyond!).

There is no cost for your appointments at the hospital, nor for your labour/delivery and postnatal stay, but there will be out of pocket costs for your appointments with your GP.

- *Midwifery-led antenatal clinic*

Midwifery led antenatal clinics provide care to low risk women during pregnancy. If you attend the midwives clinic you will likely see a different midwife for most visits, and your visits will be at the hospital and there is no fee. A doctor will likely see you the first or second time you visit the Hospital and again later in your pregnancy, if needed. A different team of midwives will assist you during and after the birth of your baby.

- *Doctor-led antenatal clinic*

Obstetric antenatal clinics provide care for women at low and high risk of pregnancy complications. The doctor you see may change at each of your visits. A combination of midwifery and medical care is provided as needed and all of your visits will be at the hospital, with no out of pocket costs. A different team of doctors and midwives will assist you during and after the birth of your baby.

- *Midwifery Group Practice (MGP) or Caseload Midwifery*

MGP or caseload midwifery enables women to be cared for by the same midwife (primary midwife) supported by a small team of midwives throughout their pregnancy, during childbirth and in the first 6 weeks at home with a new baby. If you are interested in MGP, please let the midwife know during your first appointment at the hospital, as places are limited. Many of your pregnancy appointments will often be done at your home with no out of pocket costs.

Flinders Medical Centre only allows low risk women to be cared for in this model; whereas Women's and Children's Hospital and the Lyell McEwin Hospital have all-risk models. All hospitals offer home birth to eligible women through this program. This model of care provides exceptional continuity of care for all of your pregnancy appointments, your labour and delivery, and 6 weeks of postnatal support. You will still need to find a GP for baby's immunisations at 6 weeks and ongoing care into the future.

- *Aboriginal Family Birthing Program*

Some public hospitals offer Aboriginal women or women having an Aboriginal baby continuity of care with an Aboriginal Maternal Infant Care (AMIC) worker and a midwife/obstetrician in Aboriginal Family Birthing Programs.

PRIVATE HOSPITAL CARE

- *Private Care with an Obstetrician*

As a private patient, you will see your Obstetrician in their consulting rooms for your pregnancy care. Your Obstetrician, or sometimes another Obstetrician who works in the same practice, will attend the birth of your baby alongside the hospital's midwifery team.

You will need a referral from your GP prior to seeing a private Obstetrician for care.

Not all private Obstetricians deliver at all private hospitals. The private hospitals that currently offer maternity services are Ashford, Burnside and Calvary North Adelaide.

Each hospital lists the Obstetricians that deliver there (see below for links to their websites). Some Obstetricians also offer deliveries at public hospitals.

You will need to have Top Hospital private health insurance to birth in a private hospital. You do not need Top Hospital Cover to deliver in a public hospital with a private Obstetrician, but you do need some level of Private Hospital Cover in most cases.

There will be out of pocket expenses for potentially all of your antenatal appointments, the planning and management fee half way through your pregnancy, and the excess for your hospital stay. There may also be fees to pay the Anaesthetist and the Paediatrician. Each Obstetrician will be able to provide you a fee schedule if you enquire.

Booking into the private hospital is usually overseen by your private Obstetrician who will provide you with the forms. Many hospitals have electronic forms you can complete.

Private Hospitals and Delivering Obstetricians – click links below:

[Ashford](#)
[Burnside](#)
[Calvary](#)

PRIVATE MIDWIVES

A privately practising midwife is an endorsed midwife who is self employed or employed within a private group practice. The majority of privately practicing midwives do not have admitting rights to South Australian hospitals, this means they are not able to be your care provider in a hospital setting and are only able to provide birthing services for women in their homes. The one exception is Sue Macfarlan who delivers at Lyell McEwin Hospital.

There are costs associated with this model of care, although a Medicare Rebate can be claimed for antenatal and postnatal visits. This model of care offers continuity of care for pregnancy appointments and labour and delivery at home, as well as 6 weeks postnatal. If you are transferred to a hospital, your care will be taken over by the hospital team and your midwife can only be a support person.

RURAL BIRTHING

There are many birthing hospitals in Rural and Regional South Australia, and each has their own way of managing antenatal care and labour and delivery. If you live rurally, it is best to discuss with your GP all your care options. Rural hospitals can only deliver low risk women, and all have a BMI cut off of 40 at delivery.

HOW DO I BOOK INTO A PUBLIC BIRTHING HOSPITAL?

If you have chosen to give birth at a public hospital, call the Pregnancy SA Referral Line on 1300 368 820 (available Monday to Friday, 9.00 am to 4.00 pm, excluding public holidays). You will be given an individual Reference Number and directed to the hospital you are zoned to. You then call the hospital and make a 'Triage Appointment' or a 'Booking Appointment'. This is also the case for the 3 Regional Hospitals listed below.

Metropolitan Hospitals

Flinders Medical Centre: 08 8204 5197

Lyell McEwin Hospital: 08 8282 0255

Women's and Children's Hospital: 08 8161 7592

Regional Hospitals

Mount Barker: 08 8393 1715

Gawler: 08 8521 2000

Victor Harbor: 08 8552 0500