

<b>Reference:</b>	FOI.19197.25
<b>Subject:</b>	Maternity service
<b>Date of Request:</b>	29 December 2025

**Requested:**

1. Are midwives in your trust/board protected by Working Time Regulations 1998 (WTR)?
2. Is there any system in place to audit or ensure compliance with WTR within your maternity service?
3. Are midwives in your trust/board asked to opt out of WTR protections as a condition of employment?
4. If so, is it made clear to staff that the opt-out is voluntary? Is the opt-out time-limited, or indefinite? And under what criteria, 'emergency' or otherwise, does your maternity service justify this opt-out?
5. What are your staffing arrangements for covering on-call maternity services, either at home births and/or to cover short staffing within the maternity unit?
6. How often are midwives in your trust/board called out to provide services overnight after working clinically during the day? In these instances, what is your system for compensatory rest and/or time off in lieu (TOIL)?
7. If a midwife identifies that s/he is unable to provide safe care due to exhaustion, do you have a standard operating procedure for providing relief?

**Response:**

1. Hywel Dda University Health Board (UHB) confirms that all UHB staff including midwives, are protected by the Working Time Regulations 1998 (WTR).
2. The UHB confirms that it uses the Electronic Staff Record (ESR) and Allocate systems to monitor and audit compliance with the WTR.
3. The UHB confirms that staff are not asked to opt out of the WTR.
4. UHB staff can voluntarily opt out of WTR, however, opting out is indefinite.
5. The UHB provides care across the three (3) counties of Carmarthenshire, Ceredigion and Pembrokeshire, with maternity on-call arrangements differing for each due to population and service needs. In Carmarthenshire, the aim is to have four (4) on-call midwives to cover the home birth service and any staffing shortfalls in the Midwife Led Unit (MLU) that cannot be covered by the acute service. In Ceredigion, two (2) on-call midwives cover the home birth service and provides support on the ward, and in Pembrokeshire, the aim is to have four (4) on call midwives to cover both the home birth service and the freestanding MLU.
6. To enable maternity provision twenty-four (24) hours a day, seven (7) days a week, community midwives operate the on-call service alongside their normal community role. The on-call period commences at 17.00 and ends at 09.00 the following morning, including weekends and Bank

Holidays. Each midwife can cover one (1) to two (2) on-call sessions per week with compensatory rest built into the roster. However, this is negotiable and dependant on the individual midwives and the hours worked.

7. The UHB does not hold the requested information as it does not have a Standard Operating Procedure (SOP). However, the UHB does have Policy 665 - Maternity Escalation of Clinical Concerns that can be utilised where appropriate. A copy of the policy has been provided at Attachment 1.

If a midwife identifies that they are unable to provide safe care for any reason, they are encouraged and supported to escalate their concerns to their Line Manager or the Unit Coordinator, and the next on-call midwife would then be asked to take over. In addition, a dedicated midwifery manager (formed of the senior leadership team) is on call twenty-four (24) hours a day to offer advice and support and may also attend home births to provide clinical assistance where required.

The UHB is committed to a supportive and cohesive approach to escalation and respects individual autonomy. This enables an individualised response that promotes and supports the specific needs of staff and service users.