

<b>Reference:</b>	FOI.19412.26
<b>Subject:</b>	Maternity transfers
<b>Date of Request:</b>	27 January 2026

**Requested:**

This request relates to the monitoring of transfers during labour or shortly after birth from midwifery-led settings, as set out in the *All Wales Guidelines for Transfers from Community and Freestanding Midwifery Units*, including the audit and review tool referenced in Appendix H.

The guideline states that all Health Boards should monitor specific information relating to maternity transfers, including timings, reasons for transfer, and clinical outcomes.

Information requested

For each freestanding midwifery unit (FMU) and alongside midwifery unit (AMU) operated by Hywel Dda University Local Health Board, please provide the following information as routinely collected, in aggregated form, for the most recent five complete calendar years (or the longest period held if shorter):

1. Number of transfers from FMUs and AMUs:
  - a. Broken down by parity (nulliparous / multiparous), where held
  - b. Broken down by stage:
    - Intrapartum
    - Immediate postnatal
    - Neonatal
2. Reason for transfer, using the Health Board's existing categories (e.g. request for epidural, slow progress, fetal concerns, maternal concerns, emergency).
3. Mode of transfer, where recorded (e.g. ambulance, private car, internal transfer).
4. Timing metrics, where these are routinely monitored or audited, including:
  - a. Time from decision to transfer to departure from the midwifery-led setting
  - b. Time from departure to arrival at the obstetric unit
  - c. Time from arrival to first medical review  
(Please provide averages, medians, or ranges as held.)
5. Birth outcomes following transfer, including:
  - a. Whether birth occurred within 1 hour of arrival at the obstetric unit
  - b. Mode of birth (e.g. spontaneous vaginal birth, instrumental birth, caesarean section), where held in transfer audits
6. Clinical outcomes, including:
  - a. Number of transfers associated with an adverse clinical outcome, as defined by the Health Board
  - b. Number of transfers reviewed as part of a serious incident review or equivalent governance process

7. Copies of, or links to, any internal audit reports, dashboards, or annual summaries used by the Health Board to monitor transfers from midwifery-led settings during the period requested.
8. A brief description of:
  - a. The definitions used by the Health Board for “transfer”
  - b. Any known limitations in the data (e.g. changes in recording practice, digital vs paper tools)

**Response:**

Hywel Dda University Health Board (UHB) is unable to provide you with all the information requested, as it is estimated that the cost of answering your request would exceed the “appropriate limit” as stated in the Freedom of Information Act 2000 (Appropriate Limit and Fees) Regulations 2004. The “appropriate limit” represents the estimated cost of one person spending 18 hours (or 2 ½ working days) in determining whether the UHB holds the information, and locating, retrieving and extracting the information.

As not all of the information requested is recorded centrally, the UHB would be required to undertake a manual trawl of all maternity patient records, paper-based and electronic, to identify any information that would fulfil questions 1, 2, 4, 5 and 6 of your request, as the information is not easily accessible.

The UHB is therefore applying an exemption under Section 12 of the FoIA, which provides an exemption from a public authority’s obligation to comply with a request for information where the cost of compliance is estimated to exceed the appropriate limit.

However, under Section 16 of the FoIA, we are required as a public authority, to provide advice and assistance so far as it is reasonable to individuals who have made a request under the FoIA, this can include assisting a requestor to further refine their request.

Unfortunately, the UHB is unable to provide advice on how you can refine your request. This is due to the UHB still requiring a manual trawl of maternity records to be undertaken to identify any of the information requested.

The UHB can confirm that following a systematic review of data-collection processes across its Maternity Services, and the move away from mixed paper-based and digital systems, a unified and standardised approach has now been implemented to ensure robust and transparent data collection, which will make accessing and collating data easier.

Additionally, the UHB is unable to provide you with some of the requested information for question 1, as there is a potential risk of identifying individuals if this was disclosed. The UHB is therefore withholding the following details under Section 40(2) of the FoIA:

- The figures in the tables have been replaced with an asterisk (\*) due to the low number of cases (less than 5)
- The information requested broken down by parity, due to the low number of cases (less than 5)
- Some of the information requested broken down by stage, due to the low number of cases (less than 5), as they could be used to calculate the withheld figure.

It is not within the expectation of these individuals that their personal data would be released into the public domain. This information is classed as personal data of a third party. Therefore, it is being

withheld in accordance with the exemption set out in section 40(2) of the FoIA, by virtue of section 40(3)(a) of the FoIA, which permits a public authority to withhold personal data other than the requestor's where the disclosure would breach Data Protection principles.

This information is protected by the Data Protection Act 2018 (DPA)/UK General Data Protection Regulations, as its disclosure would constitute unfair and unlawful processing and would be contrary to the principles and articles of the UK GDPR. This exemption is absolute and therefore, there is no requirement to apply the public interest test.

In reaching this decision, the DPA and UK GDPR define personal data as data that relates to a living individual who can be identified solely from that data or from that data and other information, which is in the possession of the data controller.

1. The UHB provides within the tables below, the number of maternity transfers, by hospital, parity and stage, during the 2021 to 2025 calendar years.

<b>Bronglais General Hospital (BGH) - Alongside Midwifery Unit (AMU)</b>						
		2021	2022	2023	2024	2025
a. Parity	Multiparous/Nulliparous	S12 applied		13	30	21
b. Stage	Intrapartum			Section 40 applied		Not held
	Immediate postnatal	Not held				
	Neonatal	Section 12 applied				

<b>Glangwili General Hospital (GGH) - AMU</b>						
		2021	2022	2023	2024	2025
a. Parity	Multiparous/Nulliparous	92	84	89	98	59
b. Stage	Intrapartum	Section 40 applied	78	78	90	50
	Immediate postnatal		6	11	8	9
	Neonatal	Section 12 exemption applied				

<b>Withybush General Hospital (BGH) - Freestanding Midwifery Unit (FMU)</b>						
		2021	2022	2023	2024	2025
a. Parity	Multiparous/ Nulliparous	33	26	20	19	28
b. Stage	Intrapartum	26	Section 40 applied	20	12	14
	Immediate postnatal	7		0	*	9
	Neonatal	Section 12 exemption applied			*	5

2. An exemption under Section 12 of the FoIA has been applied. Under Section 16, the UHB can confirm that it uses the All-Wales Midwifery Led Care (MLC) Guideline. A link to the guideline has been provided below.

<https://wisdom.nhs.wales/health-board-guidelines/hywel-dda-file/1299-midwifery-led-care/>

3. The UHB confirms that transfers from the FMU in WGH utilise the Dedicated Ambulance Vehicle located on-site. As AMUs are within a hospital setting, no transport is required.
4. An exemption under Section 12 of the FoIA has been applied.
5. An exemption under Section 12 of the FoIA has been applied.

6. The UHB has no adverse clinical outcomes relating to maternity transfers recorded on its Datix incident reporting and risk management system, during the 2021 to 2025 calendar years.
7. The UHB does not hold the requested information, as it does not produce internal audit reports specifically relating to transfers. However, with the implementation of a complete digital solution, this data will be part of routine monitoring.
- 8a. The UHB utilises the All-Wales MLC Guideline, provided in response to question 2 and the All-Wales Guideline for Maternity Transfers from Community and FMU. A copy of the guideline has been provided at Attachment 1.
- 8b. Since 2021, the UHB has undertaken a systematic review of its data-collection processes and implemented updates to improve accuracy, consistency, and completeness. This has included reducing reliance on mixed paper-based and digital methodologies in favour of a more streamlined and standardised approach. From 2026, all areas are required to collect and report the same defined dataset for audit purposes, ensuring uniformity and supporting improved monitoring and governance.