*Can you tell me just to start off with, how outpatient induction of labour was explained to you perhaps by your community midwife?*

Erm.. it was explained to me that I’d go to.. go in at eleven, no I think it was half past ten or something like that, and then erm.. she wasn’t quite sure what.. whether they would give me [the tablet or the pessary].

*Yeah*.

And then that was all really.. yeah. Just went in, erm.. just to go in on that day.

*Yeah. So what did you think of that option when it was offered to you?*

Erm… I wanted to go [redacted due to sensitive identifying material] home [redacted due to sensitive identifying material].. so yeah.

*So, what was.. what made you keen to go home?*

Erm.. just to be in my own environment and be able to relax and, you know, potter around and things like that.

*Yeah*.

[Baby crying]

Sorry.

*That’s alright. Hello!*

I’ll just pick her up. Yeah just to… just be in my own environment really, at home.

*Yeah. OK, so can you tell me what happened on the day? So you went in at your allotted time and then what happened next.. just take me through step by step.*

So I’d started tightening on the Monday night so I’d called on the Tuesday morning and they said.. and I said ‘Oh do I need to come in, erm.. ‘cos I would quite like to do it on my own as such’, but they wanted me to come in and be monitored. Erm.. so when I went in we.. had to wait a little while in, like, a separate room and then we were taken into the little, erm.. induction room. The only thing about that room is that it’s very small and very, very hot and there’s no windows or any air really – there’s only one little fan. Erm.. and then I was given a leaflet about induction of labour and then popped on the monitor and then the process started.

*Then the process started. So what happened next?*

The, er.. sorry, do you mind if I? [feed the baby]

*You get yourself sorted, that’s fine.*

The, erm.. the midwives looking after me.. were, erm.. I had a student and a midwife looking after me. They were brilliant. But I think they, erm.. I could sense that maybe.. they didn’t do it.. outpatient, outpatient induction very often and maybe they had a bit of anxiety about ↑it. Erm..

*Yeah. What made you think that?*

Erm.. it was just the way in which they would communicate with me about it and, erm.. they were like ‘oh, we’ll see you after your assessment,’ things like that and then ‘we’ll discuss with the doctor’ and I was like, ‘OK, yeah, I understand you need to run it past the doctor before I go home and things.’ And I think because I was tightening they were also concerned [redacted due to sensitive identifying material].

[redacted due to sensitive identifying material]

[redacted due to sensitive identifying material] Erm.. so yeah, I was monitored for quite a while actually and then they put the [dinoprostone pessary] in and then I was monitored again for quite a long ↑time. Erm..

*Can you remember for how long?*

So it was about a good hour or so I was monitored afterwards and then erm.. I was sent off for a walk and then they wanted to monitor me again before we went ↑home. So I’m not sure why, erm.. quite what the.. like, guideline is for monitoring at all. Erm..

*Yeah. What was it like being monitored?*

Yeah, it was fine. It’s just.. it was just because of the room.. that it’s very restrictive in there so.. so.. and it was a really hot day.. and I don’t know.. you just felt really lethargic and all I wanted to do was get up and move around and walk about really, that’s the only thing.

*OK, so you went off, pottered around, came back again for some more monitoring and then what happened next?*

And then I was allowed to go home. So.. it must’ve been about five, half past five when I got to go home.

*So you’d arrived at ten-thirty, eleven-ish and you then you went home at five. OK.. so.. how was your journey home?*

Erm.. yeah, no it was.. yeah, it was fine. Yeah [laughter]. Erm.. the only thing is ‘cos the traffic, it’s, erm… was crazy but, erm.. yeah, like.. like the midwives were brilliant in the erm.. thing but I just.. I could just sense that they weren’t.. they were like, ‘oh, if you start tightening any more, we don’t want you to go home.’ I could just sense that they weren’t quite maybe as comfortable as me going home as.. as I felt that I was comfortable about going home.

*Sure, sure. OK so when you got home, what did you get up to?*

Erm.. so we had some like snacks and things, just pottered around, went on my ball, erm.. and I was using my TENs machine and, erm.. then.. I sent my husband off to, erm.. to go for a sleep. And then I woke him up about midnight, half past. No. Actually before that, [the telephone triage] rung.. so that’s really nice that they.. I really liked that they rang and…

*Were you expecting them to call?*

Yes. Erm… the midwife at the hospital said, erm.. ‘They’re going to call you tonight at ten o’clock, but if they don’t call you make sure you ring them’. And I really liked that they were, like, checking in to.. you know.. check that everything was alright ‘n things so that was really nice.

*What sort of things did they ask you?*

Like if I was.. like if I was having any tightenings or contractions and if I’d had any bleeding or erm.. baby was moving around and things like that. And, erm.. they said, you know, they said to me, you know, ‘we’re here at the end of the phone and if, you know, just call us, but you can just go into the hospital if you call us, just let us know’, and.. they were really good.

*Sounds like you found it reassuring.*

Yeah, really, really reassuring. It was nice to just.. have someone at the end of the phone just to.. just to check you’re alright and that. It was really nice.

*That’s good.*

And then I phoned them back at about.. I think it was about half past midnight, one o’clock or so.. because they said, ‘As soon as they [the contractions] get up to three in ten we want you to go back into the hospital,’ so they got up to three in ten and we went back to hospital then.

*OK. So in that period while you were at home erm.. how was your, you know, how did your partner find the process? What was his involvement, what was he doing?*

Erm.. at.. when we first got home he was just making sure that I’d had something to eat and drink.. and drink and things like that, erm.. but probably about eleven o’clock or something like that… that’s when I went, that’s when I sent him up to have a sleep. And I think because I’m quite.. I’m a person that can.. just like.. I like to be left alone like if I’m in pain or anything. I’m not, you know, not.. I don’t mind.. don’t really mind if.. I was happy he was upstairs and I could call if I needed him.

*Yeah, of course. And any other family members or friends that you had contact with while you were at home or did you just sort of get on with it?*

No, just get on with it.

*Yeah. OK, fine. Perfect. Good.. OK so [the telephone triage] said ‘OK, maybe time to head back in,’ so erm.. so how was your journey back in?*

Erm.. it was a bit uncomfortable in the car but I had my TENs machine which was.. I love my TENs machine [laughter] which was brilliant. Erm…

*Did you sit in the front or the back?*

I sat in the front.

*Did you? Yeah I was just curious.*

Yeah, my partner is a bit of a worrier so I think he was er.. a bit worried but erm.. I kept him [inaudible] fine and that.

*It’s always a bit daunting that journey back to hospital for partners sometimes. But he was alright.*

Yeah he was fine.

*That’s good.*

And then.. we.. the good thing about it was that I was allowed to go back to the birth centre so I didn’t have to go to labour ward which was really nice. And, erm.. I really liked that. Erm.. and then when I got there they just left me for a little bit just to settle into the room and that.. which was really nice. And then they came in and, like, checked me over.. examined me and things and there was no difference in [cervix] at all.

*OK.*

Which was quite, erm..

*How did you feel about that?*

Oh [laughter] not good at all for me. It was quite a erm.. like disappointing as such. You just feel like what have you been doing the whole day. And, you know, very tired as well. Because I’d not slept at all on the Monday night either.

*Oh no. OK.*

So they talked about me going back home.. erm.. like about the benefits of going back home but, erm.. I wanted to try and get a little bit of rest ‘cos in my head [redacted due to sensitive identifying material] I was, like, I need to get a bit of rest. So I had some pethidine.. and they were really good, they kept me on the erm.. birth centre upstairs which was lovely.. and just kept popping in and listening in to baby and things which was really nice.

*That’s nice. So what happened after that? Did you carry on with the induction process or..*

So it came to the morning and the midwives handed over and, erm.. I’d got a little bit of rest but the contractions started coming back obviously because the pethidine was wearing off.. the contractions started coming back and, erm.. they were like ‘We’ll keep you up here ‘til about eleven o’clock,’ because my assessment wasn’t until about half past twelve.

*Yeah OK.*

And, erm.. then there was some discussion about examining me [redacted due to sensitive identifying material] and there was a bit of delay [redacted due to sensitive identifying material] erm.. but they apologised.. I think it was just a bit busy and things, and that was alright.. yeah.

*So then what happened after that?*

So the erm.. induction midwife gave me a.. sweep and then sent me off for a walk and said that she could er possibly break my waters [redacted due to sensitive identifying material].

*So, you know, what do you think you might.. would you tell a friend, say, who was having an induction of labour about the process. What do you think you might..*

Erm..

*Recommend it or..*

Yeah. No, I would recommend having the [dinoprostone pessary] and going home you know. Because I know it didn’t get me into labour but it definitely did.. you know.. help.. you know.. because the end of.. when I actually got into labour it was very.. quick, you know.

*Do you think there were any downsides to being at home?*

No I don’t.. no, no. It was just nice to be able to, you know, erm.. get something to eat and drink when you want and, erm.. you know, lay where you want.. you’ve got all the space, you know, you’re not confined, I’ve got my ball. ‘Cos I’m quite tall, the balls, like.. the balls at the hospital aren’t big enough for me to sit on so it was nice to, erm.. be able to use that and yeah..

*So more in your own environment.*

Yeah. And just.. I think it’s more relaxing.. relaxing you know.

*OK. Perfect. Well, that pretty much covers all my questions really so thank you very much. Is there anything else that you think’s important for me to know about that happened during your erm.. induction journey let’s say?*

The only other thing is I would say is like.. erm.. like.. I.. they were very.. they stressed very much as soon as I was contracting [redacted due to sensitive identifying material] they wanted me to go to the hospital but I wonder whether they would.. it would be better for women to stay at home a bit, you ↑know? Being a first-time mum, like, erm.. stay at home a bit longer with those contractions going [redacted due to sensitive identifying material].

*Yeah, yeah. OK, brilliant. Thanks ever so much.*

That’s alright.