

13 January 2026

Workplace Practices in the Maternity Service

- 1. Are midwives in your trust/board protected by Working Time Regulations 1998 (WTR)?**

Yes

- 2. Is there any system in place to audit or ensure compliance with WTR within your maternity service?**

All Midwives are on the e-roster system that has safeguards built in to highlight WTR breaches

- 3. Are midwives in your trust/board asked to opt out of WTR protections as a condition of employment?**

No

- 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?**

Not applicable

- 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?**

With regards a homebirth there are 2 midwives on-call for a homebirth from 37 weeks gestation of a woman's pregnancy until her birth.

There are 3 midwives on-duty in each locality at the weekend to ensure the homebirth on-call rota and antenatal/postnatal visits are covered at the weekends.

There is also a senior midwife on call for the maternity hospital and homebirths for advice

- 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)?**

Midwives are only called out when they are called for a homebirth. The midwives receive the following day off as compensatory rest.

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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?

This has not occurred within the Belfast Health and Social Care Trust and there is no Standard Operating Procedure however if were to occur, a discussion with the Community Midwife Team Lead and community teams would take place to provide the midwife with sufficient relief from work, the on-call rota would be covered by another midwife from the teams and thus ensuring safe care to the women.