



**BUILT
FOR
CBR**

Northside Hospital Project

Birth Centre Design Roundtable



ACT
Government

**BUILT
FOR
CBR**

**Welcome
Helen Leayr – Managing
Director, Communication
Link**



**BUILT
FOR
CBR**

Welcome Address

Rachel Stephen-Smith

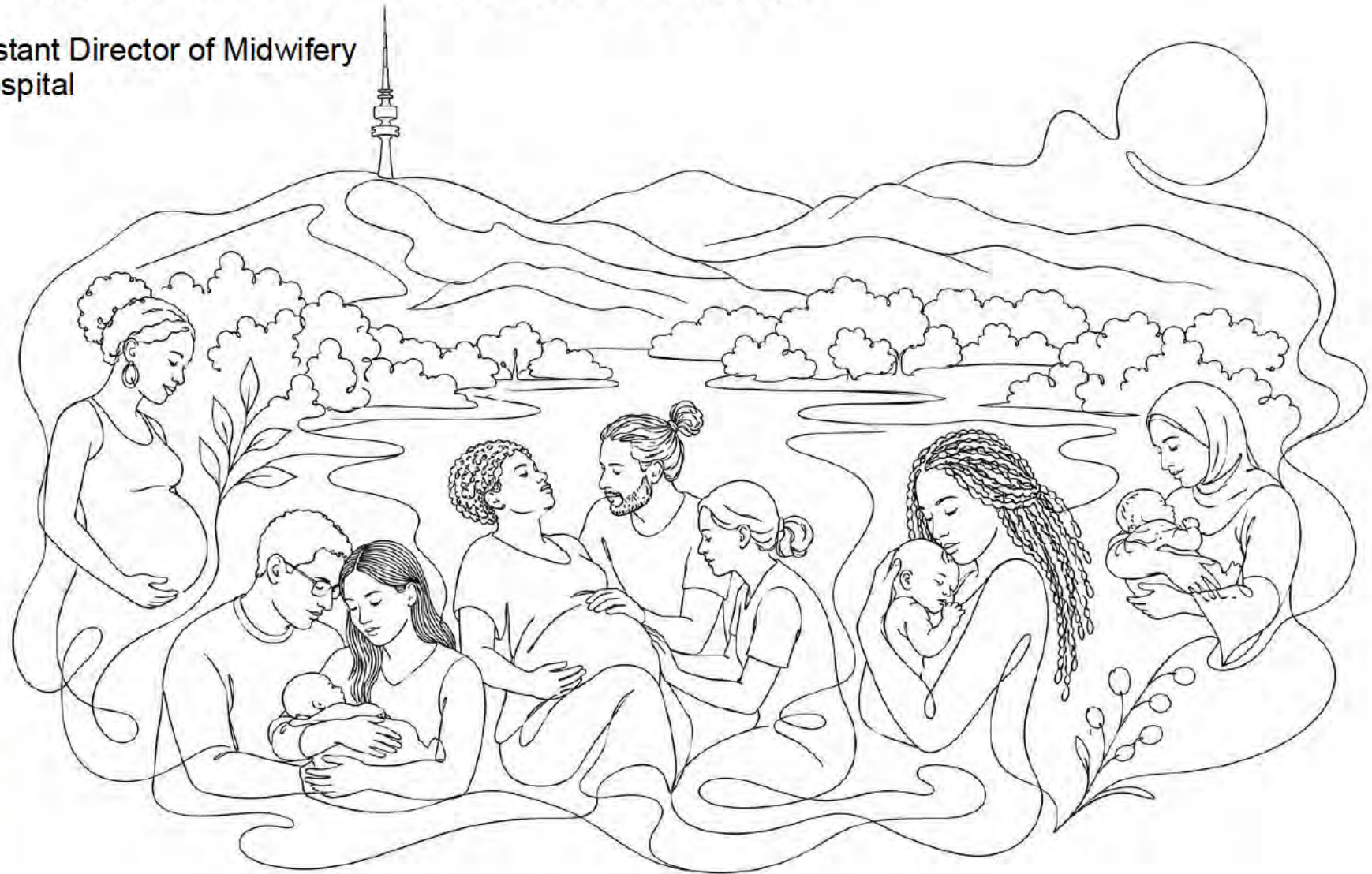
Minister for Health



ACT
Government

From Vision to Reality: Co-Designing a Birth Centre in Canberra's North

Hana Sayers, Assistant Director of Midwifery
North Canberra Hospital



Accessibility

call (02) 5124 0000



Interpreter

call 131 450

canberrahealthservices.act.gov.au/accessibility



Acknowledgement of Country

Canberra Health Services acknowledges the Ngunnawal people as traditional custodians of the ACT and recognises any other people or families with connection to the lands of the ACT and region. We acknowledge and respect their continuing culture and contribution to the life of this region.



Artwork credit:

Natalie Bateman (Walbanja-Yuin)
Monga Waratah 2021

What is a Birth Centre?

- A healthcare facility designed to be a maternity care hub that is:
 - Nurturing, home-like and less medicalised
 - For care across the continuum of pregnancy, labour and birth, and postpartum
 - Aligned with the philosophy that pregnancy and birth are normal life events
 - Designed to house a Midwifery Group Practice model of care
 - Supportive of culturally safe and trauma-informed care that is holistic and woman/person-centred



Place of birth and why it matters



Global context: Cochrane review including 12, 000 birthing people (Hodnett et al., 2012)

Australian context: Study of 258,161 full term birthing people and their babies in NSW (Homer et al., 2014)

Local context: Study of low-risk first time mothers, booked into the Birth Centre at the Canberra Hospital (Wong et al., 2015)

- ↑
 - Spontaneous vaginal birth
 - Initiation and continuation of breastfeeding
 - Care by a known midwife
- ↓
 - Epidural
 - Episiotomy
 - Augmentation
 - Assisted birth
 - Caesarean birth
 - Induction

~ Benefits to birthing people, safe for the baby and no significant difference in adverse perinatal outcomes ~

It's not just about outcomes...

Experiences matter!

People who give birth in a Birth Centre are more likely to:

- Rate their birth care positively & choose the same setting again (Hodnett et. al, 2012)
- Feel their care was comprehensive and personalised
- Have enhanced self-esteem
- Have a positive relationship with their midwife
- Feel supported to be actively involved in decisions (Alliman & Phillippi, 2016)

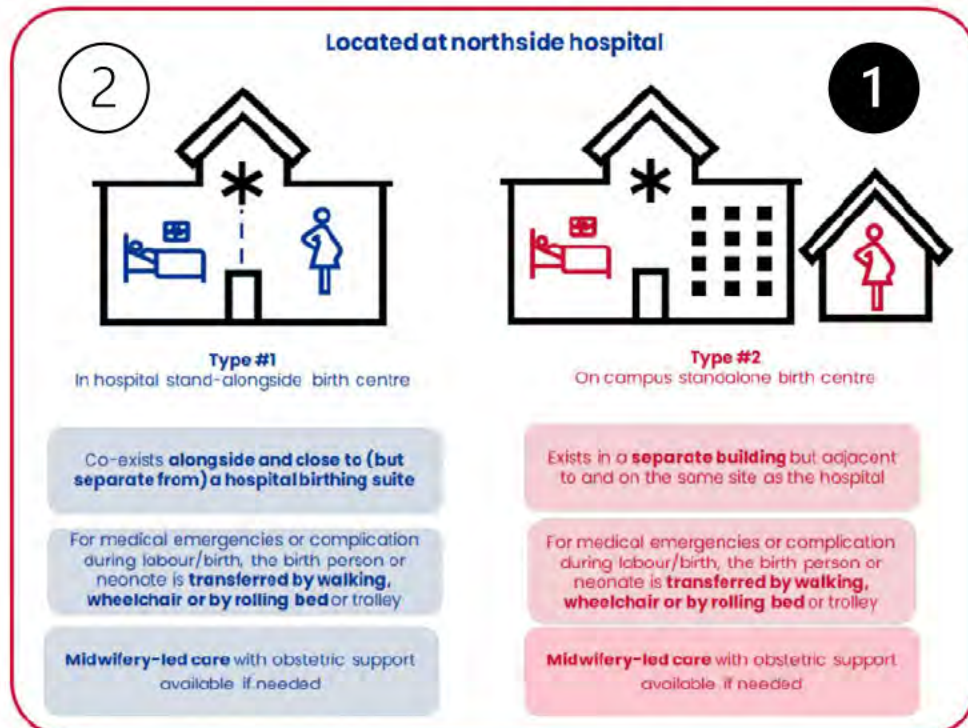


Birth Centres in the ACT



Journey to a new Northside Birth Centre

- Advocacy from consumers and professional groups
- 8th February 2023 – THE MOTION
- 2024 – Feasibility study
- May 2025 – Release of the Feasibility study report



ACT Health

Options for the Northside Birth Centre

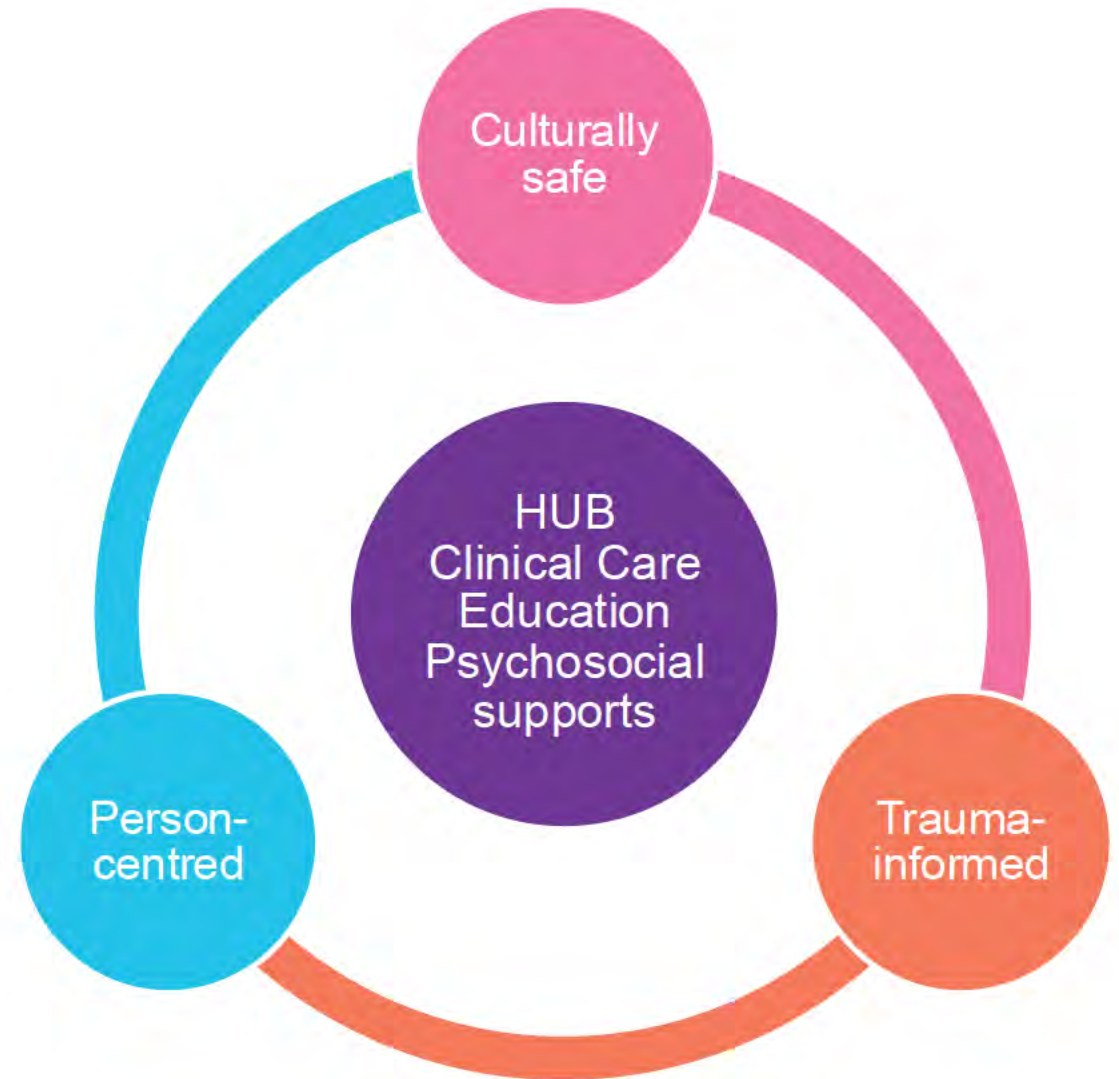
Feasibility study report

16 October 2024

Design considerations

Voices from the Feasibility Study:

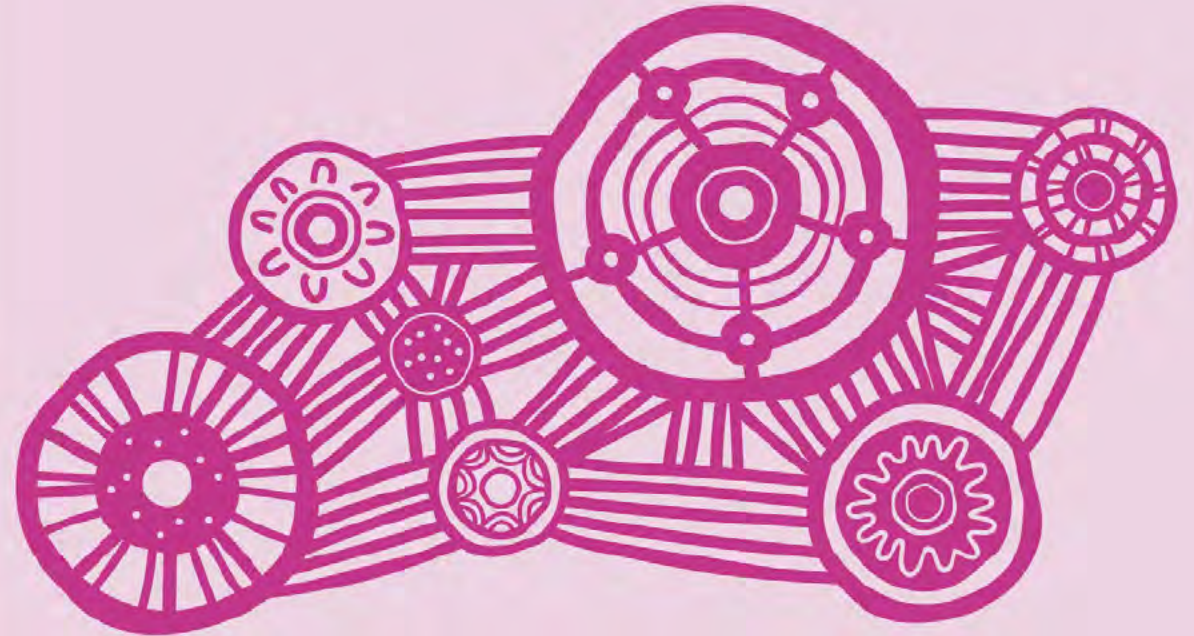
- Respects diversity
- Acknowledges and accommodates past traumas
- Needs and preferences at the forefront
- Separate entrance and facilities
- Homely, non-medical design
- Access to outdoor areas
- Parent education spaces
- Dedicated spaces for bereavement care



Honouring Culture: Safe maternity care for First Nations families

“A birthing place is... around ceremony, it is about cultural interconnectedness... Where we revitalise and renew our traditional practices for mother and babies... Just because we sit in an urban setting doesn't mean we can't bring back those things... *It is a humanistic thing*... It is a connection to country... it's the start of our first ceremony.”

Jody Currie, CEO Aboriginal and Torres Strait Islander Community Health Service (ATSICHS), quoted in Kildea et al., 2017



Bobbi Lochyer - Ngarluma, Kariyarra, Nyulnyul, and Yawuru artist







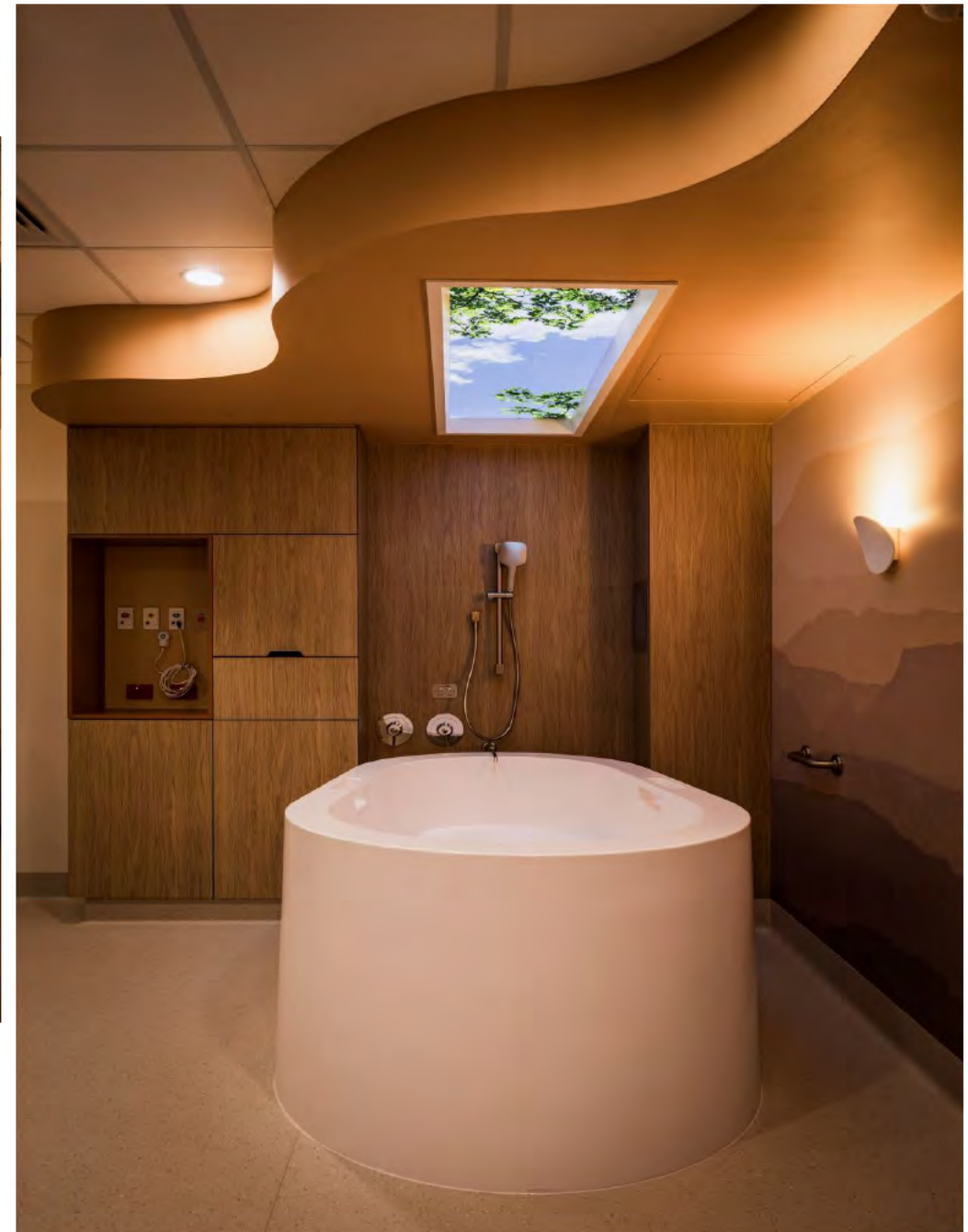
Water immersion



Water immersion



Water immersion

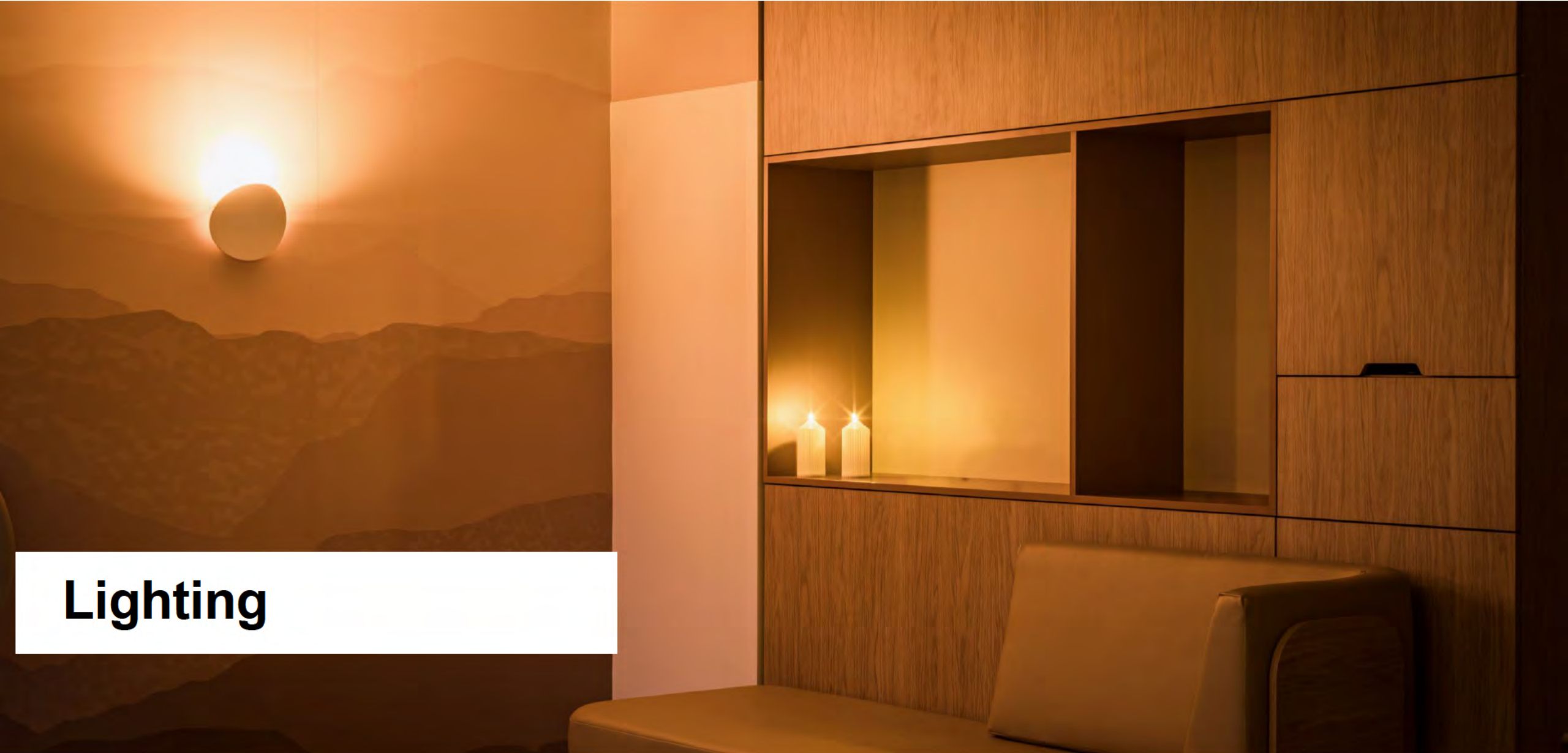


Shower

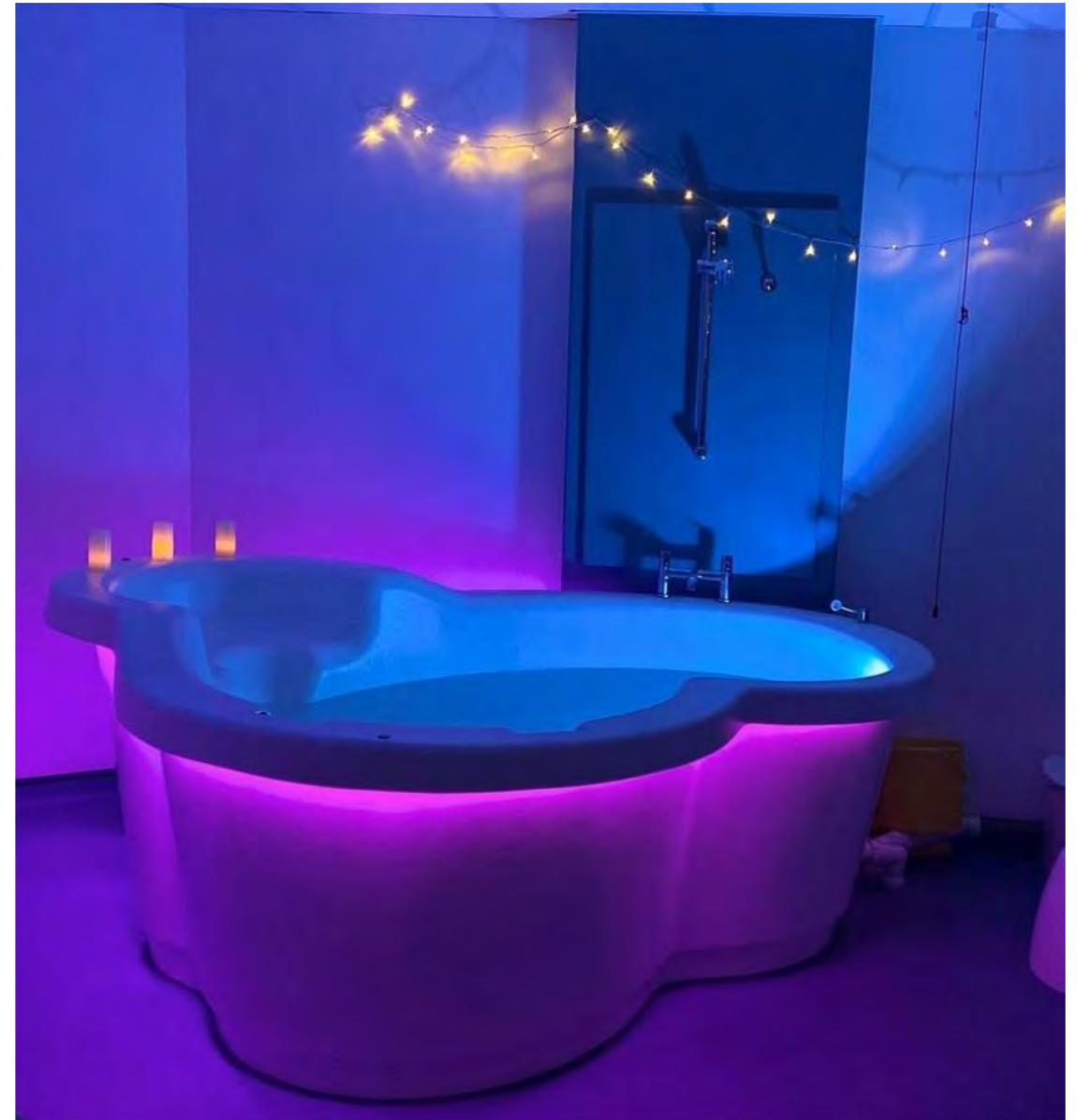


bathroom





Lighting

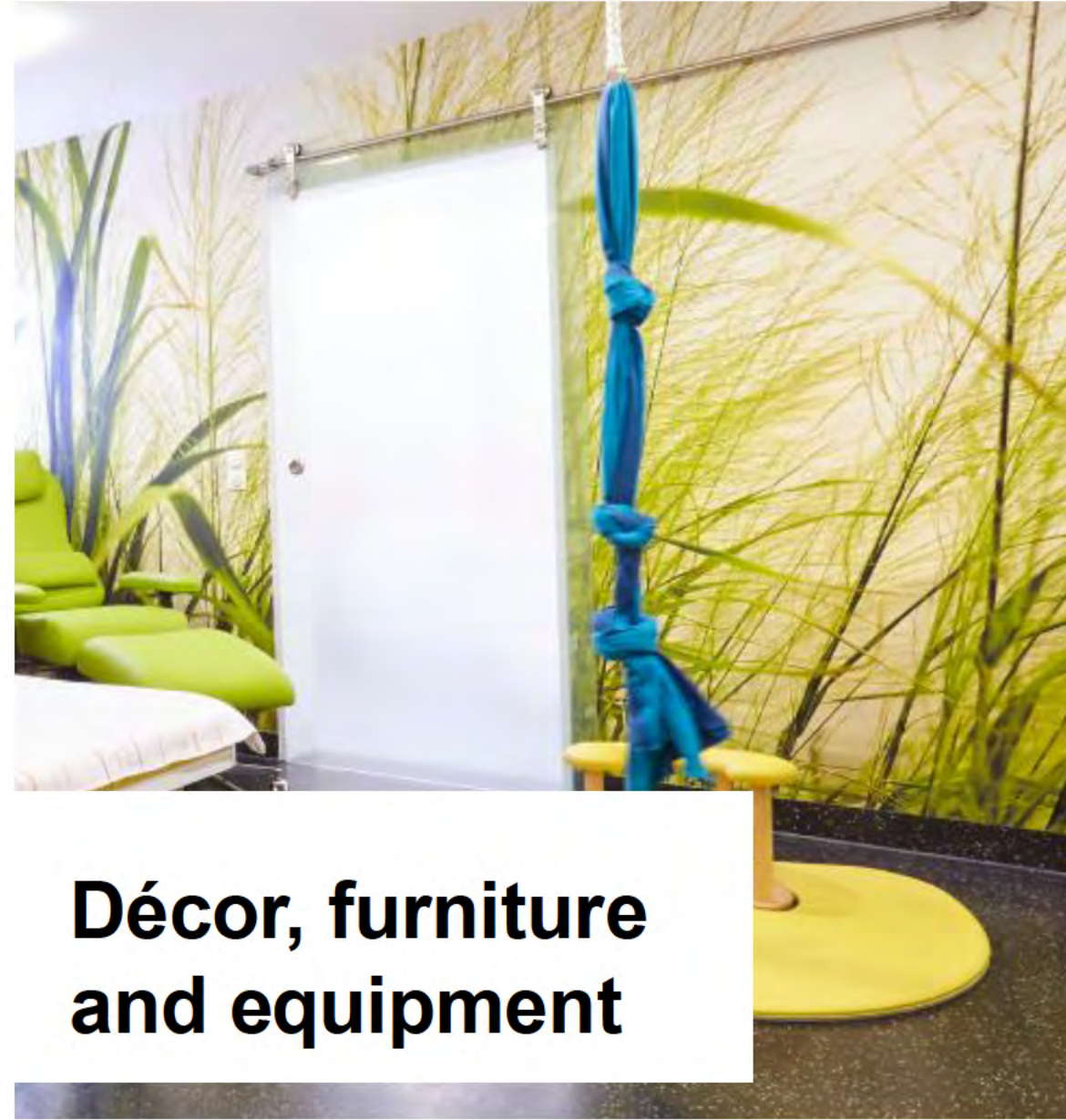






Windows and natural light

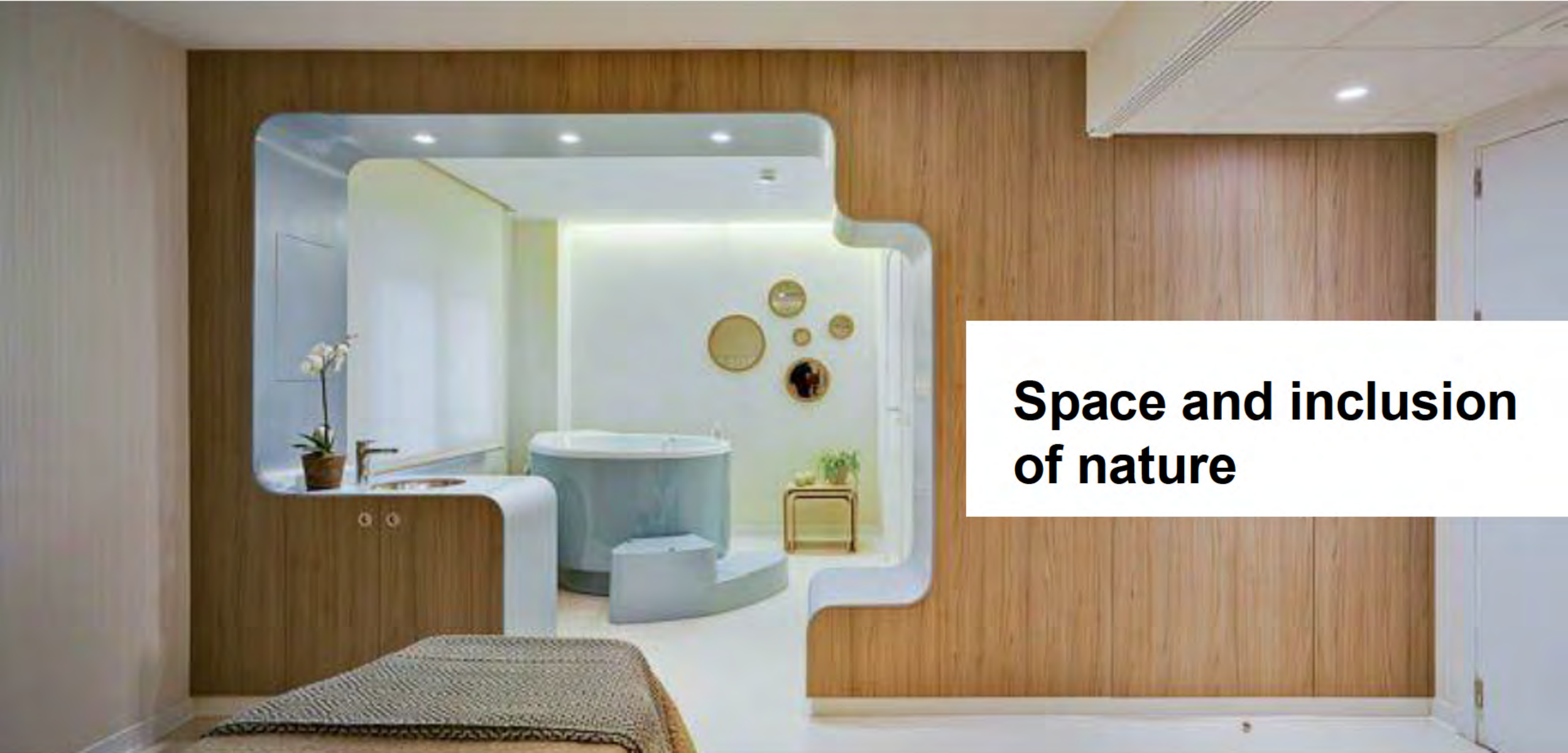




Décor, furniture and equipment







**Space and inclusion
of nature**





Community spaces









Thank you

References:

ACT Health Directorate. (2024). Options for the Northside Birth Centre: Feasibility study report. Australian Capital Territory Government. https://www.act.gov.au/__data/assets/pdf_file/0003/2855181/ACT-Birth-Centre-Feasibility-Study-report.pdf

Alliman, J., & Phillippi, J. C. (2016). Maternal Outcomes in Birth Centers: An Integrative Review of the Literature. *Journal of Midwifery & Women's Health*, 61(1), 21–51. <https://doi.org/10.1111/jmwh.12356>

Hodnett, E. D., Downe, S., & Walsh, D. (2012). Alternative versus conventional institutional settings for birth. *Cochrane Database of Systematic Reviews*, 8. <https://doi.org/10.1002/14651858.CD000012.pub4>

Homer, C. S., Thornton, C., Scarf, V., Ellwood, D. A., Oats, J. J., Foureux, M. J., Sibbritt, D., McLachlan, H. L., Forster, D. A., & Dahlen, H. G. (2014). Birthplace in New South Wales, Australia: An analysis of perinatal outcomes using routinely collected data. *BMC Pregnancy and Childbirth*, 14(1), 206. <https://doi.org/10.1186/1471-2393-14-206>

Hutton, E. K., Reitsma, A., Simioni, J., Brunton, G., & Kaufman, K. (2019). Perinatal or neonatal mortality among women who intend at the onset of labour to give birth at home compared to women of low obstetrical risk who intend to give birth in hospital: A systematic review and meta-analyses. *EClinicalMedicine*, 0(0). <https://doi.org/10.1016/j.eclinm.2019.07.005>

Kildea, S., Hickey, S., Nelson, C., Currie, J., Carson, A., Reynolds, M., Wilson, K., Kruske, S., Passey, M., & Roe, Y. (2017). Birthing on Country (in Our Community): A case study of engaging stakeholders and developing a best-practice Indigenous maternity service in an urban setting. *Australian Health Review*, 42(2), 230–238.

Wong, N., Browne, J., Ferguson, S., Taylor, J., & Davis, D. (2015). Getting the first birth right: A retrospective study of outcomes for low-risk primiparous women receiving standard care versus midwifery model of care in the same tertiary hospital. *Women and Birth*, 28(4), 279–284. <https://doi.org/10.1016/j.wombi.2015.06.005>

**BUILT
FOR
CBR**

Project Update

Hayley Bell

Executive Group Manager, iCBR

The journey so far..

- **Legislative Assembly motion:** March 2023
- **Feasibility study delivered:** September 2024
- **Engaged a broad range of stakeholders:** clinicians, midwives, Aboriginal health, community, GPs, universities
- **Connected with the community:** petition (3,000+ signatures), focus groups, cultural advisory input
- **Demand, workforce and cost modelling:** projected 937 low-risk births per year by 2050

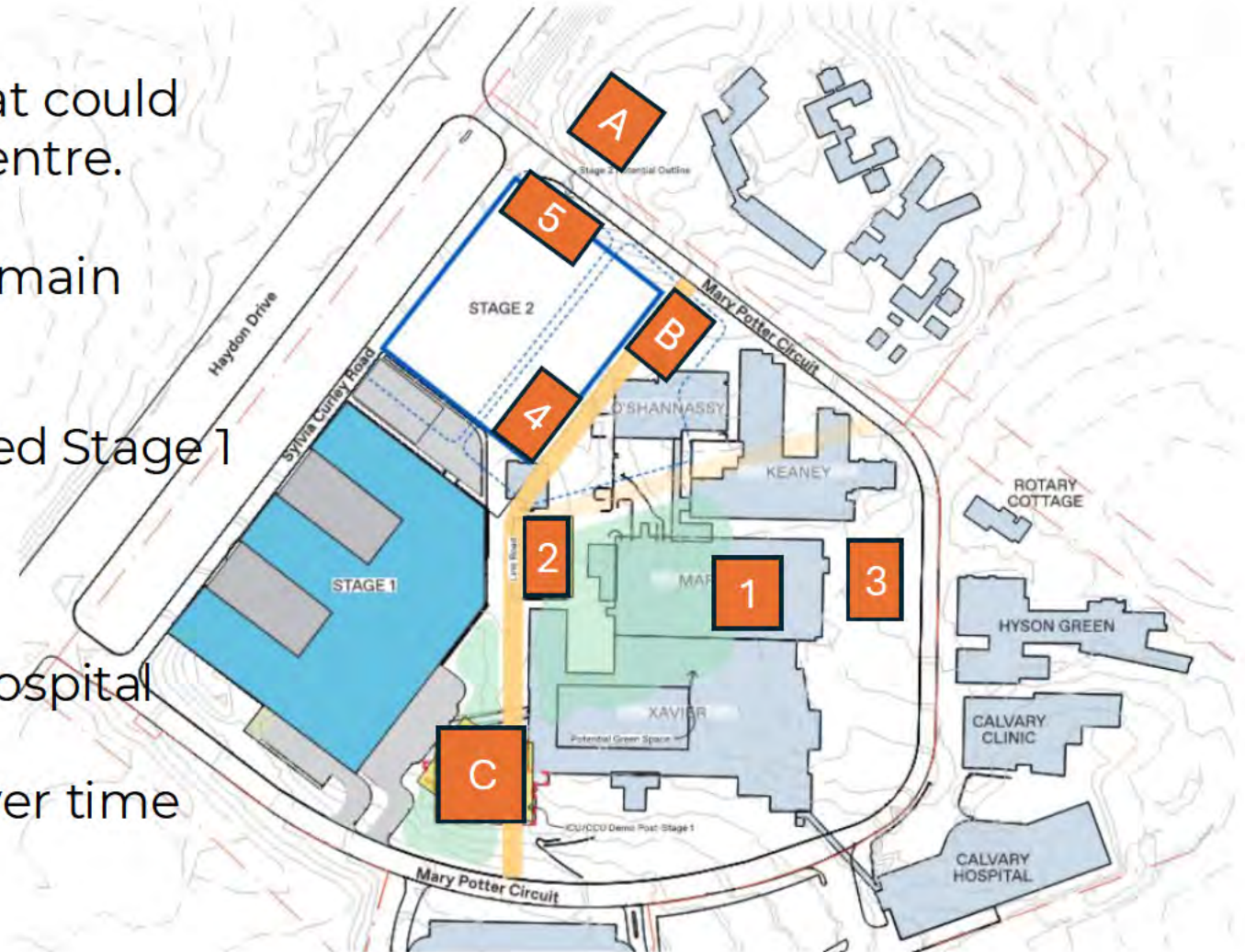
Feasibility study outcomes

Feasibility study assessed three options:

1. Freestanding (separate from hospital): *Not supported*
2. Stand alongside (within main hospital): *Supported*
3. Stand alone Birth Centre (connected to hospital): *Supported*

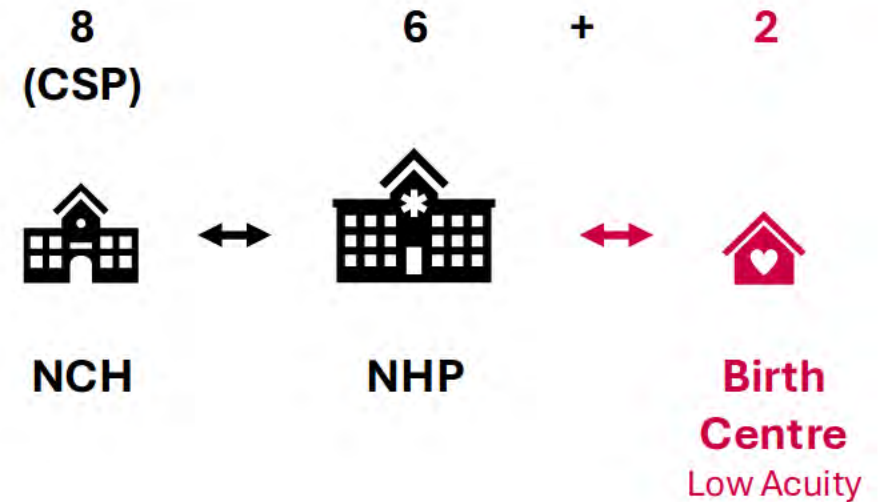
Birth Centre

- Considered zones on the campus that could accommodate a stand alone Birth Centre.
- Feasibility study required transfer to main hospital without ambulance.
- Stand alongside identified as preferred Stage 1 approach
 - Enables earlier delivery
 - Maintains safe integration with hospital services
 - Supports staged development over time



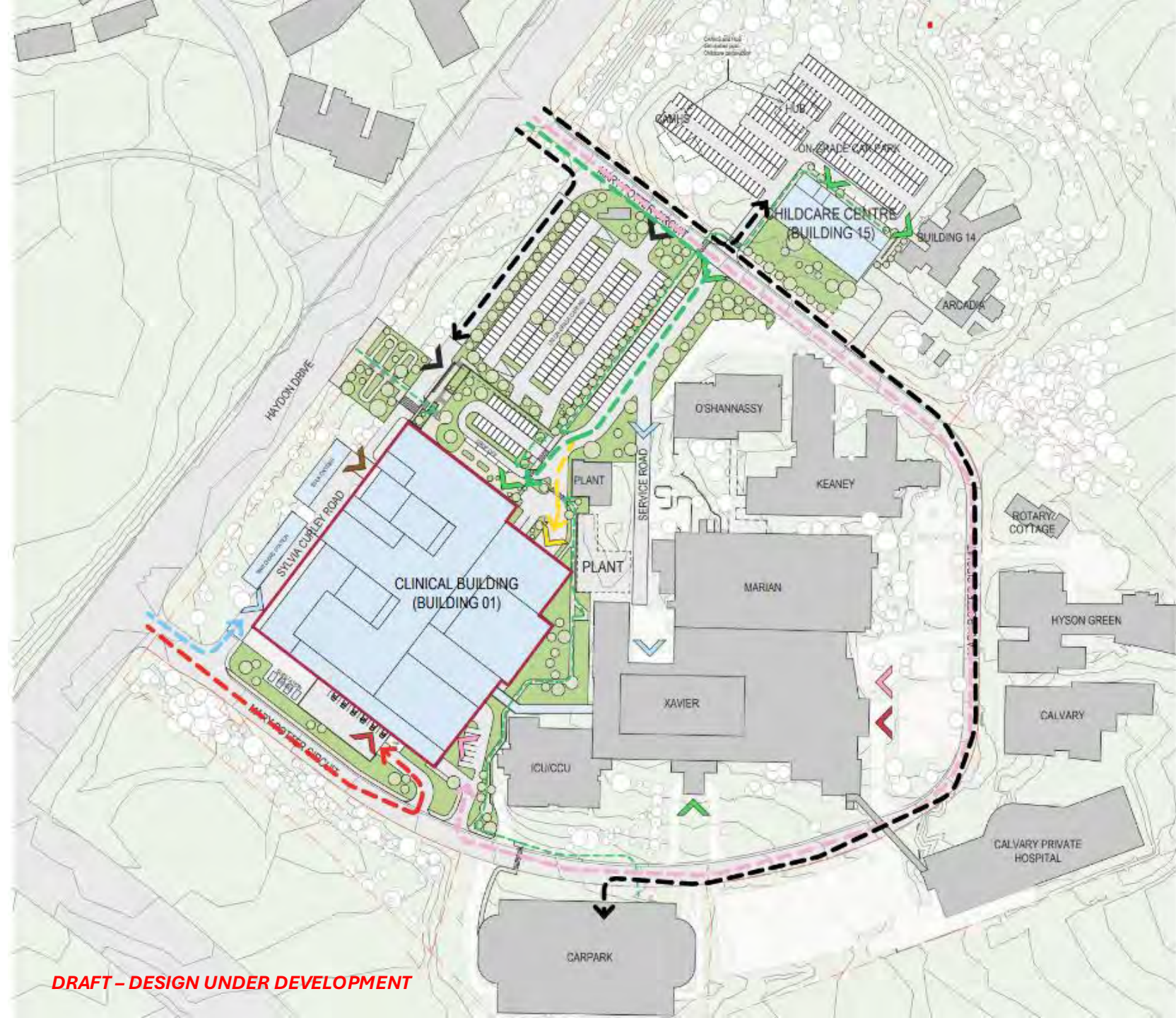
Birthing suite requirements

- **Future requirements:** The Clinical Services Plan (CSP) projects **6 suites by 2031** and **8 suites by 2041**.
- **Birth Centre proposal:** The Birth Centre is planned to include **2 low acuity suites (midwifery led)**.
- **Overall capacity:** Aligned to projected demand (up to 8 birthing suites).



Stage 1 Site Development Plan

- > PUBLIC ENTRY
- > AMBULANCES ENTRY
- > AMBULANT ED ENTRY
- > BIRTHING CENTRE ENTRY
- > MORTUARY ENTRY
- > LOGISTICS ENTRY
- > CARPARK ENTRY



Level 1 – Birthing Centre



Level 5 - Maternity



Design aspirations

Early consultation highlighted the following considerations:

- Home like, non clinical environment
- Separate entry and arrival experience
- Comfortable spaces, lighting and furnishings
- Dedicated spaces for family and support people
- Connection to outdoor areas and nature
- Support for natural birth within a safe, integrated setting
- Trauma informed, person centred design
- Co-designed with workforce and community
- Strong focus on cultural safety and Birthing on Country

**BUILT
FOR
CBR**

Roundtable Rotations

Activity Stations

Station	Theme	
1	Creating the Birth Centre Environment (Look, Feel & Identity)	What physical design features and functions are essential to create a birth centre environment that feels safe, calm, and distinctly different from a hospital setting?
2	Designing for Labour, Birth & Movement	How should the physical space and infrastructure support safe, flexible, and empowering labour and birth experiences?
3	Supporting Families & Support People	How should the birth centre be designed to meet the needs of partners, families, and support people?
4	Cultural Safety, Inclusivity & Dignity in Design	How can the physical environment of the birth centre actively support cultural safety, inclusivity, and respect for all families?
5	Flow, Function & Continuity of the Birth Journey	How should the layout and infrastructure of the birth centre support a smooth, safe, and continuous journey from arrival through to discharge?
6	Lunch	

**BUILT
FOR
CBR**

Prioritisation

Prioritisation

- ☐ **5 green dots** → *Must Haves*
- ☐ **3 yellow dots** → *Nice to Haves*
- ☐ **3 red dots** → *Concerns /
Needs Careful Design*

Next Steps

- Today's feedback will be captured in a listening report that will be shared with all participants today
- Insights will inform initial design work and next phases
- Ongoing engagement:
 - There will be further opportunities for engagement
 - Details to be confirmed as work progress

BUILT
FOR
CBR

Thank you

info.northsidehospitalproject@act.gov.au