

Ref. No: 1123  
Date: 06/08/24  
Subject: Maternity services

## REQUEST

1. Please could you tell me how many consultants are onsite at all maternity departments within the trust during the following times (if there is more than one maternity department within the trust please provide figures for each maternity department)
  - a) Midday (12pm) on weekdays
  - b) Midnight (12am) on weekdays
  - c) Midday (12pm) on Sundays
  - d) Midnight (12am) on Sundays
2. Please provide figures for your current a) emergency caesarean rate a) elective caesarean rate.
3. Please could you tell me if there are any targets or policies in place to address the existing a) emergency caesarean rate b) elective caesarean rate if either are deemed outliers compared to other trusts.
4. Please provide details of your current policy on maternal request caesareans.

Please note – just to clarify I mean consultants available for emergencies.

## RESPONSE

	Whiston	Ormskirk
1a	1	1
1b	1	0
1c	1	1
1d	1	0
Em CS rate	23.2%	20.0%
EI CS rate	19.9%	20.7%

2 Shown in table above

3. As of October 2021, Caesarean section rates have not been monitored in this Maternity Unit. This was following recommendation 15 -Caesarean section rates, in the Government response to the HSCC report “Safety of maternity services in England”. Instead, we monitor using the Robson Classifications and whether caesarean sections have been undertaken within the correct time frame. However, for the purpose of this request in the financial year April 23 to March 24 the rates are shown in the table for relevant sites

4. When a woman or pregnant person with no medical indication for a caesarean birth requests a caesarean birth it is important to explore, discuss and record the specific reasons for the request including the following issues

If a woman or pregnant person requests a caesarean birth, discuss the overall benefits and risks of caesarean birth compared with vaginal birth (see the section on planning mode of birth) and record that this discussion has taken place

Offer discussions with a senior midwife and/or obstetrician and other members of the team if necessary, for example an anaesthetist, to explore the reasons for the request, and ensure they have accurate balanced information. Sign post them to RCOG leaflet ‘choosing to have a caesarean section.’

If a woman or pregnant person requests a caesarean birth because of tocophobia or other severe anxiety about childbirth (for example, following abuse or a previous traumatic event), offer referral to a healthcare professional with expertise in providing perinatal mental health support to help with their anxiety. Refer to the Fine Clinic (P007 Guideline for the Management of Antenatal and Postnatal Mental Illness)

Ensure healthcare professionals providing perinatal mental health support to women or pregnant people requesting a caesarean birth have access to the planned place of birth during the antenatal period in order to provide care.

If after an informed discussion about the options for birth including the offer of perinatal mental health support if appropriate the woman or pregnant person requests a caesarean birth, support their choice

If a woman or pregnant person requests a caesarean birth this should be offered within their obstetric unit.

