

**When telephoning please ask for Mrs L Grabe**

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Our Ref: LMS/LG/JT/Access.72102-05-21

Date: 26<sup>th</sup> July 2021

Dear Ms Robinson

**RE: FREEDOM OF INFORMATION**

Please find below our response to your request for information in accordance with the Freedom of Information Act

The Divisional Director of Nursing and Midwifery for Wirral University Teaching Hospital has provided the information required for this response.

**Please can you provide me with the following information:**

**Q1. How many maternal request caesareans were carried out in your Trust between April 2019 and April 2020 with no other significant medical, obstetric or psychological indication?**

Between 01/04/2019 and 31/03/2020, 27 CS were performed with maternal request as the primary indication.

10 of these were purely for maternal request with no other factors affecting the choice.

For the remaining 17 vaginal birth may have been an possible option, but other factors may have impacted their choice for caesarean section – these included previous traumatic (psychological) birth experience (7); large gestational age (3); small gestational age (2); previous neonatal death (2); anxiety (3)

**Q2. What were the total number of caesarean sections carried out in your Trust between April 2019 and April 2020?**

Between 01/04/2019 and 31/03/2020 a total of 874 caesarean sections were performed

**Q3. Please confirm how your Trust complies with the revised NICE guideline [NG192] in relation to Maternal Request for Caesarean Birth points 1.2.25 –**

**1.2.31 – published March 31 2021**

<https://www.nice.org.uk/guidance/ng192/chapter/Recommendations>

Local guideline complies with NICE. Please see appendix 1a on final page for flow chart. This has recently been revised with minor amendments made for ease of reading (see appendix 1). There is no specific change in practice, just amendment to ensure flow chart clarity, which was already compliant with the now updated NICE guidance.

**Q4. Do you have an explicitly stated policy not to offer Maternal Request Caesarean Sections (MRCS) in your Trust?**

No we do not have a policy that states that we should not offer MRCS.

We have a 'Birth options' pathway, whereby woman who wish to discuss a request for MRCS are referred to either a Consultant Obstetrician or the Consultant Midwife for a consultation where all wishes and preferences are discussed and an evidence-based discussion about mode of birth is facilitated. If MRCS is the preferred option following this, a referral is made for a second opinion. A MRCS is facilitated following these consultations.

**Q5. Do you have a written guideline for Maternal Request Caesarean Sections (MRCS) in your Trust? If yes, please provide a copy of the written guideline**

Yes we have guidance for maternal request caesarean section within our Elective and Emergency Caesarean Section guideline. See flow charts

**Q6. Do you require a compulsory mental health appointment in order for a Caesarean Section to be offered?**

No a mental health appointment is not compulsory.

An appointment with the Maternal Mental Health team would be made if there were any psychological indications for caesarean section to ensure appropriate and adequate support.

**Q7. Do you have a policy which states the number of weeks into pregnancy the decision for a Caesarean Section would be made? If yes please state number of weeks**

The decision for caesarean section is made depending on the timing of the discussion during pregnancy. See flow-chart

**Q8. Are there any other conditions which must be met in order to be offered a Maternal Request Caesarean Section in your Trust?**

No

**If yes, please provide a copy of the conditions**

Not applicable

We hope this information fully answers your request but if anything further is required or you are dissatisfied with the management of your request, please contact the Access to Information Office.

Yours sincerely



**Lin Snow**

**Head of Information Governance & Records Management**

**Data Protection Officer and Copyright Lead**

With responsibility for: **Data Quality, Clinical Coding & Information Security**

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