

Ref: FOI/GS/ID 4457

Please reply to:
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Freedom of Information Act 2000

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to maternal request caesarean sections (CS).

- 1. Advise how many maternal request caesarean sections with no obstetric, medical or significant psychological reason were carried out by each obstetric unit within your Trust between April 2016 and April 2017.*
- 2. Provide a copy of any locally agreed guidelines, staff guidelines and patient information leaflets that explain how requests for maternal request caesarean sections will be handled by the Trust.*
- 3. Please provide an explanation as to how you specifically meet NICE CG132 1.2.9.5 and if you are not, please provide the reason.*

1. There were 9 cases of elective caesarean section purely for maternal request during this period

2. The following section of the trust Guideline - Management of Caesarean Sections - explains how requests will be handled by the trust:

5.1.1 Maternal request as a single indication for CS

- Every patient who falls into this category should be reviewed in a Consultant led antenatal clinic
- Maternal request as the single factor for planned caesarean section should be explored and discussed and the specific reasons for the request documented in the notes
- The overall risks and benefits of CS compared with vaginal birth should be discussed and recorded in the antenatal notes. Ensure the woman has accurate information
- Consider a referral to the anaesthetic clinic if the request relates to the management of pain.
- Consider a referral to senior midwife/supervisor of midwives who can focus on explaining normal labour and birth and maybe able to address their specific concerns

- If, after thorough discussion, a caesarean section is still requested, then a planned CS may be considered. A named Consultant Obstetrician should be involved in this decision
- An Obstetrician unwilling to perform a CS should refer the woman to an Obstetrician who will carry out the CS

Please utilise the RCOG Patient Information Leaflet: “Choosing to have a caesarean section” (Available at: www.rcog.org.uk/en/patients/patient-leaflets/choosing-to-have-a-caesarean-section)

3. Requests handled as outlined in the guideline above meet this recommendation.

In addition, the trust document - Guidance for staff re women requesting care out of guidelines includes the following statement:

Human Rights in Maternity care: what the law says

Under the Human rights Act 1998, Article 8, women have the right to make their own choices about their care and to be given standards of care that respect their dignity as human beings. The English courts have upheld the rights of patients to make important medical decisions affecting their lives for themselves and the right to make decisions which doctors regard as ill advised’ (RE MB Adult, medical treatment) (1997). It is against the law to give medical treatment unless a person agrees to it.

A mentally competent person making an informed decision to refuse care or to birth outside of hospital cannot be compelled to change their mind.

A mentally competent patient may refuse treatment even where it may lead to death or serious harm to them or their baby (St George’s Healthcare NHS Trust vs S (1997))