

Questions about Maternity Services at Barnet and Chase Farm Hospitals

In forming these questions, I have been using data from the following documents :-

Supplementary Report into Caesarean and Induced Labour Rates NHS Barnet Clinical Commissioning Group 2012/13

Public Health Intelligence Report on Maternity Services, April 2013

Barnet, Enfield and Haringey Clinical Strategy Fact Sheet on Maternity Services

It became obvious to me from reading these documents that women giving birth in Barnet and Chase Farm Hospitals are undergoing more caesarean sections than in other hospitals in London and the UK. I could not understand why this was the case.

Elective caesarean sections are usually planned for good clinical reasons although I understand that some women chose to have one for other reasons. It is now the right of women to choose whether or not they wish to have a vaginal birth or a caesarean section and as long as the risks of the latter are properly explained (and I am sure that they are), women can make their choice.

I notice that from the statistics produced by Carole Furlong that the rates of emergency caesarean births in Barnet and Chase Farm Hospitals increased by 4 % between 2011/12 and 2012/13. This concerned me.

I would like to know

- a) How many births this 4 % refers to?
- b) What time of day were these caesarean sections begun?
- c) On what days these operations were performed?
- d) How many inductions for post maturity and no other reason lead to inductions which are followed by emergency caesarean sections in our hospitals?

This may seem ridiculously pedantic. However, it has been suggested to me that some practitioners attempt to clear their weekends and evenings in order to have free time and decide that caesarean sections be performed on overdue women earlier in the day in order for this to happen. This may be complete nonsense and I hope that it is.

I also noticed that Quality Care Commissioners have asked Barnet and Chase Farm to attempt to reduce the numbers of emergency caesarean operations that are performed as an improvement target. 30 randomly selected cases are to be annotated and examined.

- a) Has this happened?
- b) What are the results showing?

Finally, I would like to know

What percentage of patients who have medical or surgical inductions results in them undergoing an emergency caesarean operation?

Is there any evidence that shows **how** babies present who are born in this way? (i.e. Content? Distressed? Needing further medical care or intervention?).