

Trust Headquarters
Chief Nurse

Royal Albert Edward Infirmary Wigan Lane Wigan WN1 2NN

T: 01942 773291

E: kevin.parker-evans@wwl.nhs.uk

Ref: FOI/2024/10203

Date Received: 15th October 2024

Response Due: 12th November 2024

Date: 5th November 2024

Dear Sir/Madam

With reference to your request for information received on 15th October 2024, I can confirm in accordance with Section 1 (1) of the Freedom of Information Act 2000 that we do hold the information you have requested. A response to each part of your request is provided below.

In your request you asked:

Under the Freedom of Information Act, I would like to request the following information about each maternity unit within your Trust:

- 1. What type of unit this is delivery unit or birth centre. If birth centre, is this on the same site as a delivery unit or freestanding?
 - The Trust has 1 Maternity Unit, which is a delivery unit.
- 2. For each individual year over the past 5 years, how many births were there in each setting? In each of those years, what was the number of spontaneous vaginal deliveries and c-sections (please stratify this by category of c-section)?

	Births in Delivery Suite	Spontaneous Vaginal Delivery	C-Section
2019	2462	1414	1: 89
			2: 279
			3: 85 4: 330
			Not recorded: <5
2020	2327	1387	1: 146
			2: 213
			3: 65

			4: 285 Not recorded: <5.
2021	2497	1447	1: 142 2: 237 3: 76 4: 313 Not recorded: 11
2022	2547	1346	1: 177 2: 301 3: 112 4: 360 Not recorded: 17
2023	2448	1186	1036 1: 162 2: 362 3: 139 4: 366 Not recorded: 7

- 3. Which of the following non-pharmacological forms of pain relief are offered: water pool, TENS, hypnobirthing, aromatherapy, acupuncture, birth comb, sterile water injection
 The Trust offers Pool/Water. Other forms are not offered but are accepted if a woman wishes to.
- 4. In each individual year over the past 5 years, what has been the number of patients using each of the above non-pharmacological forms of pain relief offered?

	Aromatherapy	Hypnobirthing	Massage	Pool/Water	TENS	Acupressure
2019	<5	5	<5	91	23	0
2020	7	<5	6	78	30	0
2021	<5	7	7	100	24	0
2022	<5	<5	11	78	33	0
2023	<5	<5	<5	66	18	<5

^{*}non-pharmacological forms of pain relief not included are not recorded as being utilised, i.e, birth comb. *Data pulled 18/10/2024

- 5. Which of the following pharmacological forms of pain relief are offered: paracetamol, dihydrocodeine, entonox, pethidine, diamorphine, epidural, remifentanil PCA
 - Paracetamol
 - Dihydrocodeine
 - Entonox
 - Diamorphine
 - Epidural
- 6. In each individual year over the past 5 years, what has been the number of patients using each of the above pharmacological forms of pain relief offered?

	Paracetamol	Dihydrocodeine	Entonox	Pethidine	Diamorphine	Epidural
2019	13	0	1677	<5	832	468
2020	7	0	1643	0	770	481
2021	22	22	1703	<5	771	469

2022	17	16	1619	<5	463	501
2023	9	15	1503	<5	704	507

^{*}in cases where a woman has used more than one type of pharmacological pain relief, she has been included in both figures.

7. In each individual year over the past 5 years, how many patients who have an epidural use an alternative form of pain relief prior to requesting an epidural?

The maternity system can only pull that a patient has requested multiple types of pain relief. It does not specific in which order these were requested or provided. Therefore, the Trust is unable to answer this question.

8. In each individual year over the past 5 years, what proportion of patients are waiting more than 30 minutes to receive an epidural? What is the mean time taken to obtain an epidural by time of day (in hours vs out of hours)?

2019 = 0

2020 = 0

2021 = 0

2022 = <5

2023 = <5

- 9. If remifentanil PCA is available, how many patients are able to have a PCA at any one time? Remifentanil PCA is not available.
- 10. If remifentanil PCA is available, is this offered to anyone or only in those for whom an epidural is contraindicated?

 N/A.
- 11. If remifentanil PCA is not available in a delivery unit, what is the reason for this?

The department has identified that remifentanil PCA used for labour analgesia has higher risks of respiratory depression and patients need continuous midwifery presence/supplemental oxygen/continuous oxygen saturation monitoring when it is in use, as untreated maternal hypoxia could have a serious effect on fetal wellbeing.

12. Out of hours (nights and weekends), how many dedicated anaesthetists are on-site, and has this changed over the past 5 years?

We have one on-site dedicated anaesthetists for maternity covering the 24/7 period 7 days per week. This has not changed in the past five years.

13. For each individual year over the past 5 years, what proportion of patients are requesting a physiological third stage compared to an active third stage (please stratify this by setting i.e. delivery unit and birth centre)? What proportion of patients who choose physiological third stage management then go on to have a post-partum haemorrhage when compared to those who choose an active third stage?

Please see table below.

	Physiological 3rd stage	EBL > 1500mls	Other method of placental delivery	EBL > 1500mls
2019	59	<5	2392	65
2020	78	0	2239	60
2021	92	0	2382	50
2022	59	<5	2455	57

^{*}Data pulled 18/10/2024.

2023 46	0	2386	73
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The Trust has a policy of not releasing information when the data involved is less than 5. This is because we feel that such low numbers could make the individuals involved identifiable and therefore may cause undue harm and distress.

To disclose this information would:

- a) Contravene the Data Protection Act principles in that it would amount to unfair and possibly unlawful processing, as there was a legitimate expectation by the third parties that this information would remain confidential, and
- b) Disclosure may cause damage or distress to the individual(s) involved, and that damage or distress would be unwarranted (section 10 of the DPA).

If you are not entirely satisfied with this response, please do not hesitate to contact the Information Governance Department via the email address provided. If we do not hear from you within 40 days, we will assume that we have been able to accommodate your request under the Freedom of Information Act 2000.

Yours sincerely,

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Kevin Parker-Evans MBA, FCMI, CMgr. RN Dip HE

Chief Nursing Officer & Director of Infection Prevention and Control

PLEASE NOTE:

If you are unhappy with the service you have received in relation to your request and wish to make a complaint or request a review of our decision, you should write to: Information Governance Department, Wrightington, Wigan and Leigh NHS Foundation Trust, Suite 9, Buckingham Row, Brick Kiln Lane, Wigan, WN1 1XX.

If you are not content with the outcome of your complaint, you may apply directly to the Information Commissioner for a decision at:

The Information Commissioner's Office Wycliffe House Water Lane Wilmslow Cheshire, SK9 5AF

Helpline number: 0303 123 111