

Staff attitudes and knowledge towards “Gentle Caesarean Section”

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OBJECTIVE

“Gentle caesarean section” (GCS) includes four core principles:

- 1) Promotion of a holistic birth experience
- 2) Slow delivery of neonate's body
- 3) Delayed cord clamping
- 4) Early skin-to-skin contact

We aimed to safely introduce this practice to NHS Lanarkshire, a District General Hospital with approximately 5000 deliveries per year. Our objective was to assess staff attitudes and knowledge surrounding GCS to help implement an education programme and robust clinical governance.

DESIGN AND METHOD

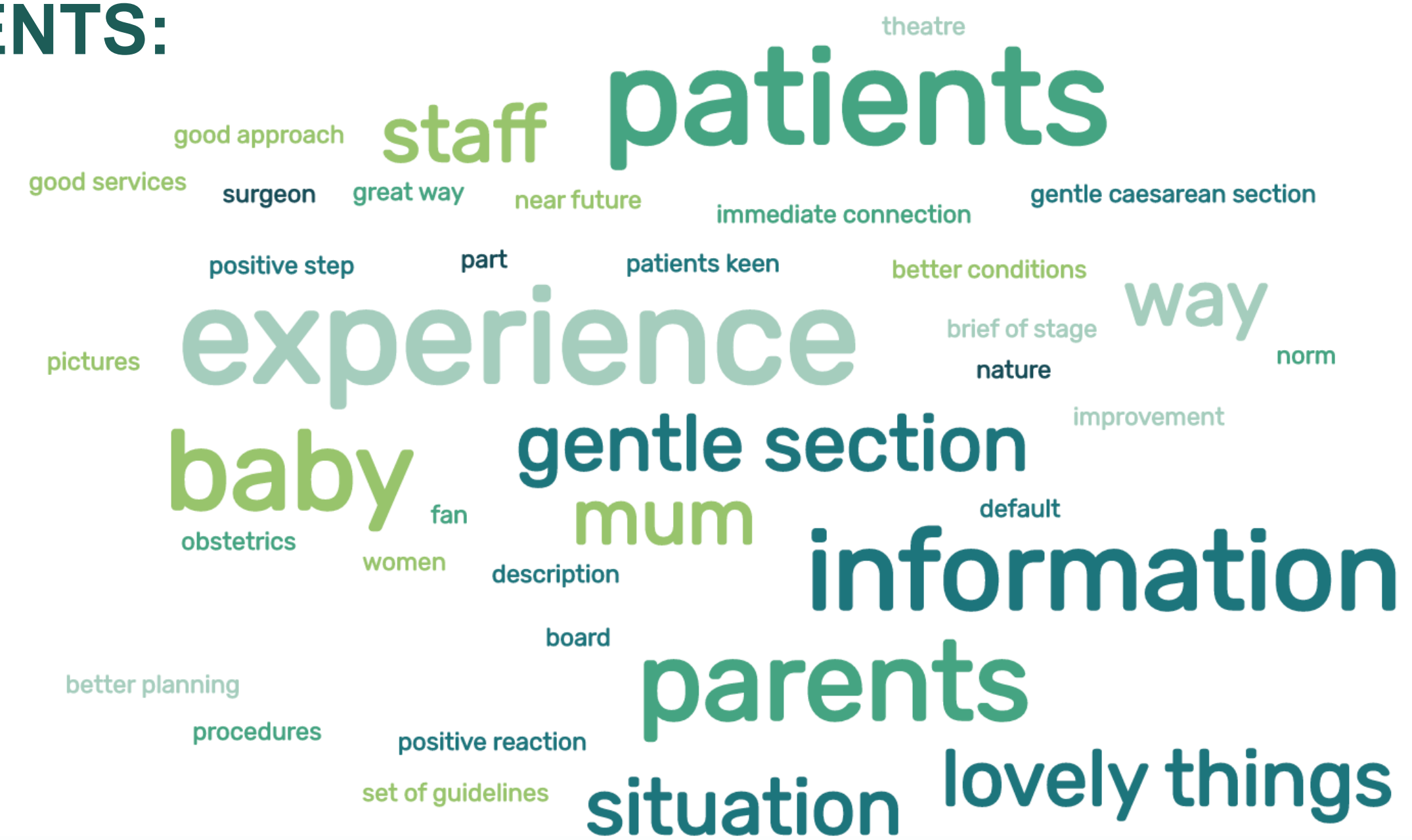
An anonymised prospective electronic questionnaire was used to collect data from obstetric multidisciplinary team staff members between January and February 2022.

Questions included:

- “Have you heard about GCS?”
- “Do you feel comfortable facilitating them?”
- “Do you have any concerns?”
- “What could be done to improve the service?”

Answers were analysed using Microsoft Excel and Microsoft Forms.

COMMENTS:



SUGGESTIONS:



RESULTS

We received 66 responses (18% O&G trainees and consultants, 16% anaesthetists, 22% midwives, 25% theatre staff and 7% O&G junior team members). 89% had heard of and 72% had seen a GCS.

Staff were moderately comfortable facilitating a GCS (average 3.69, 1- not comfortable, 5- very comfortable). Concerns included maintaining sterility (15%) and the risk of haemorrhage (8%). 59% requested more teaching on GCS, with simulated role-specific training focusing on how to maintain sterility, and contingency planning in emergency situations.

The importance of standardised antenatal counselling to help manage patients' expectations was highlighted. Positive qualitative feedback suggested that it appeared to be a fulfilling experience for patients, with earlier bonding and babies who were more settled. Staff also felt empowered by their involvement, with many in favour of this type of elective caesarean section becoming routine practice

CONCLUSIONS

This questionnaire has confirmed that the majority of staff understand the principles of GCS and wish to facilitate the change, with additional support. It formed a key foundation in developing this exciting practice in our department and has resulted in the development of a theatre safety checklist, patient information leaflet and multidisciplinary teaching. We continue to audit GCS safety standards and feedback.

This collaborative approach has led to positive staff engagement. In line with the Women's Health Plan for Scotland, we believe the GCS promotes care that is "holistic, inclusive, respectful, centred around the individual and responsive to their needs and choices".

REFERENCES

1. Smith J, Plaat F, Fisk NM. The natural caesarean: a woman-centred technique. *BJOG*. 2008;115(8):1037-1042. doi:10.1111/j.1471-0528.2008.01777.x

2. Birth Time Series Data (National Records of Scotland)

3. Women's Health Plan: A Plan for 2021-2024 (Scottish Government)