

External Cephalic Version (ECV)

Author: Natasha Archer, Consultant Obstetrician, Heather Leatham, Assistant Chief Nurse
Sponsor: Carolyn Fox, Chief Nurse

Trust Board paper C

Executive Summary

This patient story details the experience of five women who had babies presenting as breech during the third trimester of pregnancy. All five women explain how they were offered the opportunity to receive External Cephalic Version (ECV) and accepted and despite this being a very difficult time for them and their family they found the process professionally delivered; they were fully informed and felt in control of their birth plan and therefore would recommend this process if required to other mothers and families.

ECV is a process by which a breech baby can be turned from buttocks or foot first to head first. It is a manual procedure that is recommended by national guidelines for breech presentation of a pregnancy with a single baby, in order to increase the possibility of vaginal delivery.

Why Has This Patient Story Been Selected For Trust Board?

At University Hospitals of Leicester NHS Trust we have over 10,000 deliveries a year. It is expected that only 3-4% of babies are breech at term. In 2018, we encountered 315 breech pregnancies at term.

Admittedly, 115 (36.5%) require elective Caesarean section for another concern in their pregnancy. Of the remaining 200 pregnancies 103 (51.5%) give birth by Caesarean section, 12 (6%) have vaginal breech births and 85 (42.5%) have ECVs.

The breech service was set up in 2016 as we found a significant decline in women being offered and accepting an ECV and vaginal breech births as suitable options for their pregnancies. Over the last two and a half years we have been able to increase the numbers of women having ECV's and raise our success rate of this procedure to the quoted national average of 50%.

Also, in comparison to other centres that have dedicated breech services we are quoting comparable vaginal birth rates after success ECVs (80%).

ECV is a core skill that is required for trainees in Obstetrics. Having a dedicated service means that the teaching and training of this procedure is centralised and uniform.

This service will attract not only women who are interested in what we can offer them but also aid recruitment and retention of staff. This is especially for recruitment of midwives who want to work within a Trust that is able to offer a service similar to ours but also further develop this service and become part of the team caring for women with breech pregnancies.

What Are The Key Themes In The Patient Story And How Applicable Are They Across The Trust?

Patients often detail in feedback about the levels of communication that they wish to be involved and informed about their clinical care. Knowledge and choice can empower patients and as detailed in this video, the procedure was made better by them feeling in control.

This video was produced as an educational tool for a breech study day. One of the best ways to teach colleagues is to ensure that the service users' voice is heard and their perspective is

understood. This study day took place in April and was well received and feedback suggested a change in attitude toward ECV and vaginal breech births.

What Are The Key Learning Points To Improve The Quality Of Patient Care/Experience, And How Will They Be Measured And Monitored In Future?

Looking forward, the aim would be to improve the counselling offered to women with a term breech pregnancy, reduce the Caesarean section rate where breech is the primary indication, maintain a high standard of patient satisfaction and increase the rate of external cephalic version and vaginal breech birth by developing a team (Midwives and Obstetricians) proficient in these areas.

Patient feedback clearly identifies that information provision, shared decision making and allowing patients to feel in control of their treatment plans is key to ensuring high levels of patient satisfaction. This story is being shared because the women detail how they felt informed, in control and involved in decisions about their clinical care and how this in turn greatly improved their experience of care. Patient feedback will continue to be gathered and inform future developments and improvements.

Conclusion

This patient story details the experience of five women who had babies presenting as breech and has highlighted the importance of involving and informing patients, that given the appropriate information, patients are able to make informed choices, even when the procedure can cause them discomfort.

These five women explain how even under circumstances that they were not expecting and that they found difficult, they felt empowered informed and if they were in the same situation, or if a close friend or family member were in this situation, they would recommend this procedure to try and reduce the risk of a caesarean section.

Input Sought

We would welcome the Board's input regarding:

For Reference

Edit as appropriate:

1. The following **objectives** were considered when preparing this report:

Safe, high quality, patient centred healthcare	Yes
Effective, integrated emergency care	Yes
Consistently meeting national access standards	Not applicable
Integrated care in partnership with others	Yes
Enhanced delivery in research, innovation & ed'	Yes
A caring, professional, engaged workforce	Yes
Clinically sustainable services with excellent facilities	Yes
Financially sustainable NHS organisation	Yes
Enabled by excellent IM&T	Not applicable

2. This matter relates to the following **governance** initiatives:

a. Organisational Risk Register	Not applicable
b. Board Assurance Framework	Not applicable

3. Related **Patient and Public Involvement** actions taken, or to be taken: This is a Patient Story and reflects patient and public involvement and partnership working.

4. Results of any **Equality Impact Assessment**, relating to this matter: N/A

5. Scheduled date for the **next paper** on this topic: September 2019

6. Executive Summaries should not exceed **1 page**. My paper does comply

7. Papers should not exceed **7 pages**. My paper does comply