

Paper 13

Reporting to:	Public Trust Board – July 2018
Title	Maternity Services update on Midwife Led Unit (MLU) Position
Sponsoring Director	Deirdre Fowler – Director of Nursing, Midwifery & Quality.
Author(s)	Jo Banks - Women & Children's Care Group Director Sarah Jamieson - Head of Midwifery
Previously considered by	Quality & Safety Committee
Executive Summary	<p>The purpose of this paper is to update the Trust Board on current progress on the Midwifery Led Units.</p> <ul style="list-style-type: none"> • 98% of births are at Telford or Shrewsbury and 2% births are at Oswestry, Bridgnorth and Ludlow • On-going suspensions due to inability to staff units safely • Midwifery sickness rates are rising with some areas as high as 20% • Midwifery staff have been deployed to ensure safe midwifery staffing levels at the obstetric unit and to meet the quality standards set out by NHR incentivisation scheme • Engagement originally delayed due to operational pressures • Engagement then halted by NHSE and NHSI • NHSE and NHSI recommended (following legal advice) that the Trust and CCG decide collectively on one action/option in light of the safety issues facing the units and need to avoid predetermining the outcome of the CCG MLU Review • Engagement now planned for 3rd July 2018 – 14th August 2018 • We will be engaging with the public on the action required to maintain safety until the new model proposed by the CCG Led MLU Review is implemented • The action required will be to continue with the suspension of inpatient services at the 3 smaller MLU's – Bridgnorth, Oswestry and Ludlow • Communication and engagement plan published on website
Strategic Priorities 1. Quality and Safety	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Reduce harm, deliver best clinical outcomes and improve patient experience. <input checked="" type="checkbox"/> Address the existing capacity shortfall and process issues to consistently deliver national healthcare standards <input type="checkbox"/> Develop a clinical strategy that ensures the safety and short term sustainability of our clinical services pending the outcome of the Future Fit Programme <input checked="" type="checkbox"/> To undertake a review of all current services at specialty level to inform future service and business decisions <input type="checkbox"/> Develop a sustainable long term clinical services strategy for the Trust to deliver our vision of future healthcare services through our Future Fit Programme

2. People	<input type="checkbox"/> Through our People Strategy develop, support and engage with our workforce to make our organisation a great place to work
3. Innovation	<input checked="" type="checkbox"/> Support service transformation and increased productivity through technology and continuous improvement strategies
4 Community and Partnership	<input type="checkbox"/> Develop the principle of 'agency' in our community to support a prevention agenda and improve the health and well-being of the population <input type="checkbox"/> Embed a customer focussed approach and improve relationships through our stakeholder engagement strategies
5 Financial Strength: Sustainable Future	<input type="checkbox"/> Develop a transition plan that ensures financial sustainability and addresses liquidity issues pending the outcome of the Future Fit Programme
Board Assurance Framework (BAF) Risks	<input checked="" type="checkbox"/> If we do not deliver safe care then patients may suffer avoidable harm and poor clinical outcomes and experience <input type="checkbox"/> If we do not work with our partners to reduce the number of patients on the Delayed Transfer of Care (DTOC) lists, and streamline our internal processes we will not improve our 'simple' discharges. <input type="checkbox"/> Risk to sustainability of clinical services due to potential shortages of key clinical staff <input type="checkbox"/> If we do not achieve safe and efficient patient flow and improve our processes and capacity and demand planning then we will fail the national quality and performance standards <input type="checkbox"/> If we do not get good levels of staff engagement to get a culture of continuous improvement then staff morale and patient outcomes may not improve <input type="checkbox"/> If we do not have a clear clinical service vision then we may not deliver the best services to patients <input type="checkbox"/> If we are unable to resolve our (historic) shortfall in liquidity and the structural imbalance in the Trust's Income & Expenditure position then we will not be able to fulfil our financial duties and address the modernisation of our ageing estate and equipment
Care Quality Commission (CQC) Domains	<input checked="" type="checkbox"/> Safe <input checked="" type="checkbox"/> Effective <input checked="" type="checkbox"/> Caring <input type="checkbox"/> Responsive <input type="checkbox"/> Well led
<input type="checkbox"/> Receive <input checked="" type="checkbox"/> Review <input checked="" type="checkbox"/> Note <input checked="" type="checkbox"/> Approve	Recommendation The Trust Board are asked to note the report.

**Maternity Services update on MLU position
(Update for Executives, Q&S Committee & Trust Board)**

5 July 2018

**Sarah Jamieson - Head of Midwifery
Jo Banks – Care Group Director**



Introduction

This paper updates the Trust Board on the following:

- Current instability of maternity staffing and activity
- Safety & Risks described
- Update on engagement and communications
- Recommendations

Staffing, activity & safety

Births

98% of births Telford or Shrewsbury

2% births Oswestry, Bridgnorth and Ludlow

All aspects of our escalation process have been explored to avoid suspensions

Part-time staff covering extra hours (Approx. cost 50-60K/month)

As a result of continued sickness and maternity leave levels the service is unable to sustain keeping the 3 smaller MLU's open 24/7, as 98% of the activity is elsewhere. This has meant a number of ad-hoc suspensions in line with our escalation policy and on the grounds of safety and all three smaller MLUs Oswestry, Bridgnorth and Ludlow, have been suspended since the 20th June 2018 and continue to be suspended now.

Escalation

Due to staff sickness, services in the smaller MLUs have been suspended to support activity elsewhere in the service on the following occasions:

Oswestry	07.01.18 – 12 hours	Oswestry	27.03.18 - 28.03.18
Oswestry	26.01.18 – 12 hours	Ludlow	07.04.18 – 08.04.18
Ludlow	26.01.18 – 12 hours	Oswestry	21.04.18 – 06.05.18
Oswestry	28.01.18 – 12 hours	Ludlow	22.04.18 – 20.05.18
Bridgnorth	06.02.18 – 12 hours	Oswestry	06.05.18 – 20.05.18
Oswestry	09.02.18-10.03.18	All 3	20.06.18 – on-going
Ludlow	10.03.18 - 25.03.18		

Escalation Forecast Escalation will be invoked to cover shifts, over 145 shifts remain uncovered in the current rota.

Sickness

Sickness is rising within maternity, staff are reporting work related stress, there is great instability caused by frequent suspensions. Maternity leave is just over 13.5 WTE.

Sickness in each unit/area (May 2018):

Postnatal	7.2%
Antenatal	5.2%
Delivery Suite	2.6%
Wrekin	4.8%
Shrewsbury	11.6%
Oswestry	16%
Whit/Mkt Drayton	20.5%

Staff redeployed to achieve CNST incentivisation:

4.6 WTE pulled back in to both delivery suite and postnatal ward to cover the aspects of CNST incentivisation and national quality standards – supernumerary co-ordination 24/7 on DS and care of well 34/40 on the postnatal ward transitional care.

Delays in CCG MLU Review Consultation

The service awaits the outcome of the CCG MLU Review, which could change the model of care provision; however, this still requires a period of consultation and time to implement. The care group have been advised that this consultation will not run alongside the Future Fit consultation and as such this has caused further delay. The delay in the public consultation has been highlighted as a risk to both the Clinical Quality Review Meeting (CQRM) and the MLU Review Programme Board. The following risks are identified:

- Safety may be compromised within the highest risk units due to a reduction in staff in the three high risk areas (consultant unit delivery suite, postnatal ward and antenatal ward)
- Disruption of services for women and their families and uncertainty regarding their place of birth (poor patient experience)
- Disruption to staff when redeployed as part of escalation with little notice (staff dissatisfaction)
- Increase in public concern due to increased media coverage of suspensions during escalation
- Reduction in staff morale
- Potential Increase in staff sickness absence due to work related stress
- Increase in costs associated with back-fill for staff off sick
- Reduced public confidence due to adhoc service provision and continuity.

Update on engagement and communications

A comprehensive communications and engagement plan was planned to enable us to inform the Trust Board of the outcome on the 31st May 2018. An extensive communication plan is included in the information pack

There have been extreme operational demands during this period of time causing delay in the implementation of the engagement plan further compounded by varied opinion on the interdependency with the external MLU review consultation process.

Following initial operational delay launching the engagement process on April 9th as previously planned, the revised timescale was to launch on the 14th May. However, the launch was delayed on the advice of NHSE and NHSI who requested a meeting take place between the Trust and the CCG's to discuss and collectively decide upon the best temporary way forward in light of the safety issues. At that meeting it was agreed that the safest option was to continue with the current suspension and continue with the engagement plan on that basis. This engagement is now planned for the 3rd July 2018 to the 14th August 2018. The engagement document and associated documents are available and have been shared with the Executives.

Next Steps

- Commence engagement 3rd July 2018 for temporary solution, pending the CCG review
- Continue with suspension of inpatient services at the 3 smaller MLU's – Bridgnorth, Oswestry and Ludlow

ENGAGEMENT PLAN (DRAFT)

PROPOSED EXTENSION OF TEMPORARY SUSPENSIONS OF SERVICES AT MIDWIFE LED UNITS IN BRIDGNORTH, LUDLOW AND OSWESTRY

1 INTRODUCTION

This is an engagement plan to support The Shrewsbury and Telford Hospital NHS Trust to seek the views of current maternity services users, the public and maternity staff to understand the impact of extending the temporary closure of all three rural Midwife Led Units would have on women and their families. The units are temporarily closed on safety grounds to address the ongoing operational pressures within the service and the proposal is for the temporary suspensions to continue until a new long term sustainable model of care can be implemented by Clinical Commissioning Groups.

The engagement period will run for six weeks and during that time we will seek the views of local communities through a questionnaire; women and families currently using our maternity services through a programme of targeted engagement; and liaison with representative groups such as Shropshire Healthwatch and Powys Community Health Council.

The results of the engagement period will be analysed by the Trust's Community Engagement team (which is a department outside the Women and Children's Care Group) and presented to the Trust Board alongside any associated recommendations regarding future temporary suspensions in a Board meeting on 27 September 2018 which will be held in public.

2 CONTEXT AND OVERVIEW

Since reopening our Midwife Led Units at the beginning of the year there has been a number of ad hoc and two and four-week suspensions of inpatient services at Bridgnorth, Ludlow and Oswestry. These services have been temporarily suspended under the Trust's escalation policy to ensure our midwives are where our mums are, to maintain women's safety.

Despite a successful recruitment programme which allowed us to reopen these units on 1 January 2018, our service has continued to see mums giving birth in the Consultant Unit over rural Midwife Led Units. With just over 98% of women giving birth away from our rural Midwife Led Units, we are having to deploy our midwives where our mothers are choosing or are assessed as needing to be.

The safety of women and babies using our maternity services continues to be our number one priority. Staffing levels are an important factor in delivering a safe, high-quality service

for women and their babies and we are continuing to work to make sure we have the very best teams in the right place.

We expect these operational pressures will continue going forward. We are therefore proposing to extend the period services are temporarily suspended in our rural Midwife Led Units until a new long term sustainable model of care can be implemented by our clinical commissioning groups. The purpose of this engagement is to understand the impact of extending the temporary suspensions in our rural Midwife Led Units and how this might be mitigated to best meet the needs of women using our services at this time.

The engagement period will run from Tuesday 3 July until midnight on Monday 13 August 2018. During this period of engagement, we would like to hear from local people, and particularly women and families using our maternity services to understand how we can best meet their needs at this time.

We are seeking people's views via a questionnaire which can be accessed on the maternity services section of our website or via <https://www.surveymonkey.co.uk/r/1804SaTHMS2>. We will also be undertaking a programme of targeted engagement with women and families currently using our maternity services and we will be liaising with representative groups such as HealthWatch and Powys Community Health Council.

This engagement is focused on addressing the immediate operational pressures experienced by our service. It is not part of the work being undertaken by Shropshire, and Telford and Wrekin clinical commissioning groups to develop a new long-term sustainable model of care which will be subject to formal public consultation in due course. The result of this engagement period will be analysed and summarised in a report which will be presented to the Trust Board alongside any associated recommendations in a Board meeting on 27 September 2018 which will be held in public.

The current suspension of inpatient services at the three Midwife Led Units will continue until the outcome of the engagement period is known. The units will however continue to remain open between 8am and 8pm for antenatal and postnatal outpatient services. Likewise, home births will not be affected.

3 ENGAGEMENT PROGRAMME OVERVIEW

The process

The engagement period will run for six weeks and during that time we will seek the views of:

- local communities through a questionnaire, available online at <https://www.surveymonkey.co.uk/r/1804SaTHMS2> or by requesting a hard copy by calling 01743 261000 ext 3840
- women and families currently using our maternity services through a programme of targeted conversations, which includes discussion groups. At these sessions the engagement document will be discussed, and attendees asked to complete the questionnaire
- representative groups such as HealthWatch and Powys Community Health Council.

The result of the engagement period will be analysed by the Trust's Community Engagement team (which is a department outside the Women and Children's Care Group) and will be presented to the Trust Board alongside associated recommendations in a public Board meeting on 27 September 2018.

The engagement document

At the core of the engagement programme will be our engagement document which will clearly set out the basis on which we are engaging. It will set out: the purpose of the engagement programme and the dates of when it will start and finish; the operational pressures the service is under; the proposal; information about the engagement programme, including how to respond; and how the decision about temporary suspensions going forward will be made.

The engagement document will be accessible, clear, concise and written in plain English.

In addition to the engagement document, frequently asked questions will be produced during the engagement period. These will be used to provide answers to common issues and questions that arise during the engagement period and will be available on the maternity section of the Trust's website.

The questionnaire will be available on the Trust website and for those people who do not have access to the internet hard copies can be requested by calling 01743 261 000 ext: 3840.

Raising awareness and encouraging involvement

We would like to hear from local people and particularly women and families using our maternity services to understand the impact of extending the temporary suspensions in our rural Midwife Led Units and how this might be mitigated to best meet the needs of women using our services at this time.. We are therefore proposing to raise awareness of the engagement period in the following ways:

- an initial announcement which will include a media release, letters to staff and stakeholders and social media content
- a poster will be emailed to primary care services asking them to print it out and display it in public areas, it will also be distributed across the Trust and will be made particularly prominent in our maternity services
- maternity services staff will be supported to talk to women and families using the service to raise awareness and encourage involvement
- information will be available on the maternity services section of the website.

Media approach

Our media approach will be proactive during the engagement period (as well as reacting, of course, to any enquiries or issues that arise). Across the county the local media continues to

be important in influencing public perception and reaction to all aspects of health and care changes and we will work with them and communicate key messages for the engagement through the channels they provide.

During the engagement programme we will adhere to the following key principles:

- Ensure we can provide clinical spokespeople wherever possible to explain the need for change, the options and next steps, and to support them appropriately in this role
- Work closely with local journalists and ensure they are fully briefed on the need for change, the options and next steps
- Respond to all media enquiries in a timely and helpful manner
- Regularly monitor the media and ensure that inaccurate information about the engagement programme is rebutted where necessary
- Evaluate all media coverage to assess its effectiveness, and the inclusion of our key messages, adapting our approach as appropriate.

Discussion groups

As part of the engagement programme there will be ten maternity service user discussion groups which local women and families will be invited to attend through a discussion with their midwife. There will also be ten staff discussion groups. The discussion groups will be held at Bridgnorth, Ludlow, Oswestry, Shrewsbury and Telford Midwife Led Units.

These discussion groups will be clinically led and will use the engagement document as a basis to fully explain and discuss the current operational issues, the proposal to address these operational issues and to answer any questions. Participants will then be invited to complete the questionnaire.

We will aim to include those identified by the Equality Impact Assessment in discussion groups.

We will also reinforce at every opportunity that this engagement is focused on addressing the immediate operational pressures experienced by our service. It is not part of the work being undertaken by Shropshire, and Telford and Wrekin clinical commissioning groups to develop a new long-term sustainable model of care which will be subject to formal public consultation in due course.

Questionnaire

Our questionnaire will be used to understand the impact on women and families of extending the temporary suspensions in our rural Midwife Led Units. The views and feedback gathered will be analysed and summarised in a report so that these can be understood, and taken account of, including mitigating any impacts where possible. The engagement will also provide an opportunity to seek additional insight and ideas that may not have been considered so far.

The result of this engagement period will be summarised in a report which will be presented to the Trust Board alongside any associated recommendations in a Board meeting on 27 September 2018 which will be held in public.

We will send out the link to our questionnaire by email to a wide range of stakeholders and will also make hard copies available through our maternity services, and our midwives. People will also be able to access the questionnaire via the Trust website and from our social media feeds.

Mechanisms for response

People will be able to respond via a hard copy or online questionnaire between Tuesday 3 July until midnight on 13 August 2018.

The questionnaire responses will be analysed by the Trust’s Community Engagement team, which is a department outside the Women and Children’s Care Group.

Analysis of consultation responses

The questionnaires and feedback from the focused discussion groups, will be analysed by the Trust’s Community Engagement team (which is a department outside the Women and Children’s Care Group) and summarised into a report which will be used to inform a paper for the Trust Board meeting on 27 September 2018 which will be held in public.

4 DIRECT ENGAGEMENT

Group	How	Aim
Maternity services staff – clinical and non-clinical	<ul style="list-style-type: none"> • Face to face briefing sessions • Emailed information • Updated as necessary throughout engagement period through internal communication channels – via managers and matrons etc. 	<ul style="list-style-type: none"> • Ensure staff are equipped to communicate about the engagement and answer questions from service users • Encourage maternity staff, mums-to-be and mums to be involved as appropriate • Ensure all staff are aware of how to signpost service users and local people who would like to have their say – discussion groups, online etc. • Ensure staff are aware that this engagement period is separate to the forthcoming CCG consultation about the long term sustainable model of maternity care.

<p>Current users of maternity services</p>	<ul style="list-style-type: none"> • Dedicated discussion groups across the county – invitation only and detail tbc. To include presentation of current situation and the proposal, hard copies of the survey made available, signposting to FAQs on website and online survey • Through individual engagement with their midwife encouraged to view the information and complete the survey 	<ul style="list-style-type: none"> • Raise awareness amongst women and families using the maternity service of the engagement period and encourage their involvement • Raise awareness and understanding of the current operational pressures in the service, the proposal to extend the temporary suspensions in the rural Midwife Led Units and to understand the potential impact of this on women and families using the service • Support service users to signpost other mums and local people who would like to have their say – discussion groups, online • Reinforce messaging regarding the remit of the engagement programme and that it is separate to the forthcoming CCG consultation about a long-term sustainable model of maternity care.
<p>Maternity Engagement Group</p>	<ul style="list-style-type: none"> • Dedicated meeting or as an agenda item at an existing meeting including presentation of current situation and the proposal, hard copies of the survey made available, signposting to FAQs on website and online survey 	<ul style="list-style-type: none"> • Well briefed on the current position and able to communicate the facts to service users • Ensure the group is clear on the remit of the engagement programme and that it is separate to the forthcoming CCG consultation about a long-term sustainable model of maternity care • Ensure opportunities for dialogue and feedback have been made available • Ensure the group is aware

		of how to signpost service users and local people who would like to have their say – meetings, online etc.
Maternity Voices – Local Maternity Services workstream – part of existing local maternity system programme	<ul style="list-style-type: none"> • Dedicated meeting or as an agenda item at an existing meeting including presentation of current situation and the proposal, hard copies of the survey made available, signposting to FAQs on website and online survey 	<ul style="list-style-type: none"> • Well briefed on the current position and able to communicate the facts to service users • Ensure the group is clear on the remit of the engagement programme and that it is separate to the forthcoming CCG consultation about a long-term sustainable model of maternity care • Ensure opportunities for dialogue and feedback have been made available • Ensure the group is aware of how to signpost service users and local people who would like to have their say – discussion groups, online etc.
Local National Childbirth Trust Chair/representative/groups tbc	<ul style="list-style-type: none"> • Dedicated meeting or as an agenda item at an existing meeting including presentation of current situation and the proposal, hard copies of the survey made available, signposting to FAQs on website and online survey 	<ul style="list-style-type: none"> • Well briefed on the current position and able to communicate the facts to service users • Ensure the group is clear on the remit of the engagement programme and that it is separate to the forthcoming CCG consultation about a long-term sustainable model of maternity care • Ensure opportunities for dialogue and feedback have been made available • Ensure representatives are aware of how to signpost service users and local people who would like to have their say – discussion

		groups, online etc.
Shropshire Healthwatch / Powys Community Health Council	<ul style="list-style-type: none"> • Attendance at specific meeting including presentation of current situation and the proposal, hard copies of the survey made available, signposting to FAQs on website and online survey 	<ul style="list-style-type: none"> • Well briefed on the current position and able to communicate the facts to service users • Ensure the group is clear on the remit of the engagement programme and that it is separate to the forthcoming CCG consultation about a long-term sustainable model of maternity care • Ensure opportunities for dialogue and feedback have been made available • Ensure aware of how to signpost service users and local people who would like to have their say – discussion groups, online etc.
Joint Health Overview and Scrutiny Committee	<ul style="list-style-type: none"> • Attendance at specific meeting including presentation of current situation and the proposal, detailed programme of engagement and hard copies of the survey to be made available, signposting to FAQs on website and online survey 	<ul style="list-style-type: none"> • To provide an opportunity for the committee to scrutinise the plans of engagement in line with our duty to involve service users and their role in reviewing and scrutinising matters relating to the provision and operation of local health services • Well briefed on the current position and able to communicate the facts • Ensure the committee is clear on the remit of the engagement programme and that it is separate to the forthcoming CCG consultation about a sustainable model of maternity care • Ensure opportunities for dialogue and feedback have

		<p>been made available</p> <ul style="list-style-type: none"> • Ensure aware of how to signpost service users and local people who would like to have their say – meetings, online etc.
MPS	<ul style="list-style-type: none"> • Face to face or telephone briefings offered to include update on current situation and the proposal, overview of engagement and to raise their awareness of FAQs and online survey 	<ul style="list-style-type: none"> • Well briefed on the current position and able to communicate the facts to their constituents • Ensure they are clear on the remit of the engagement programme and that it is separate to the CCG consultation about a sustainable model of maternity care • Ensure opportunities for dialogue and feedback have been made available • Ensure aware of how to signpost people who would like to have their say – discussion groups, online etc.

5 RESOURCES

The Women and Children’s Care Group will set-up and run the discussion groups and engage with the groups set out in this plan. They will also note the key themes and number of people involved in those conversations, and the meetings attended.

6 REVIEW AND EVALUATION

The questionnaires and key themes from meetings will be analysed by the Trust’s Community Engagement team and summarised in a report which will be used to inform a paper for the Board meeting on 27 September 2018 which will be held in public. It is intended that both papers will be published as part of this decision-making process.