### Recommendation

☑ DECISION

The Trust Board is asked for a decision in relation to a continued suspension of some services in our 3 smaller MLU’s (midwife led units)

### Reporting to:

Trust Board

### Date

29 November 2018

### Paper Title

Maternity : Midwife Led Units – MLU’s

### Brief Description

This paper updates the Executives, Q&S Committee and the Trust Board on the current position in relation to the 3 smaller MLU’s – Oswestry, Ludlow and Bridgnorth.

The three smaller MLUs Oswestry, Bridgnorth and Ludlow, have been suspended since the 20th June 2018 and continue to be suspended now.

There has been no increase in BBA’s during our suspension of services. In October 2018, there were 0 BBA’s. The rate is normally 0.3% in line with the national average.

Women still have a full range of options open to them for their birth, either the consultant unit, our alongside birth unit (Wrekin), our stand-alone birth unit at the Royal Shrewsbury Hospital or home birth.

Maternity sickness across the service is 5.95% having risen steadily since the summer from a rate of 3.95% following a period of heightened media scrutiny, the main reason for absence being mental health issues (34%). Maternity leave is static at approximately 13.0 WTE.

Delay in progress to implement CCG Led MLU review and Public Consultation

A comprehensive communications and engagement plan was implemented, the outcome of which was fed back to the Trust Board in October 2018.

Due to the extended delays in the public consultation on the CCG Led MLU Review the Care Group recommends that the current service suspension is maintained until such a time as the outcome of the CCG Led MLU Review is known and implemented.

### Sponsoring Director

Deirdre Fowler, Director of Nursing, Midwifery and Quality

### Author(s)

Sarah Jamieson – Head of Midwifery

### Recommended / escalated by

None

### Previously considered by

None

### Link to strategic objectives

- **Patient and Family** – through partnership working we will deliver operational performance objectives
- **Safest and Kindest** – delivering the safest and highest quality care causing zero harm
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Maternity Services update on MLU position
(Update for Executives, Q&S Committee & Trust Board)

22\textsuperscript{nd} November 2018

Sarah Jamieson - Head of Midwifery
Introduction
This paper updates the Executives, Q&S Committee and the Trust Board on the following:
- Current instability of maternity staffing and activity
- Safety & risk assessment
- Update on engagement and communications
- Recommendations

Key messages
Staffing, activity & safety
Since the 1st January 2018, 98% of women have given birth in Telford or Shrewsbury with 2% giving birth in the three smaller MLUs Oswestry, Bridgnorth and Ludlow.
Previously and over the last 2 years, the care group have explored options to cover sickness and absence by requesting part-time staff to do extra hours (Approx. cost 50-60K/month).
As a result of continued sickness and maternity leave levels the service was unable to sustain keeping the 3 smaller MLU’s open 24/7, as 98% of the activity was elsewhere.
This has meant a number of ad-hoc suspensions in line with our escalation policy and on the grounds of safety. The three smaller MLUs Oswestry, Bridgnorth and Ludlow, have been suspended since the 20th June 2018 and continue to be suspended now.

BBA’s – born before arrival
There has been no increase in BBA’s during our suspension of services. In October 2018, there were 0 BBA’s. The rate is normally 0.3% in line with the national average.

Home Births
Our current rate of home births is 1.8%, slightly above the national average of 1.4%. This is positive and demonstrates that women are still able to access a home birth.

Access to birth settings
Women still have a full range of options open to them for their birth, either the consultant unit, our alongside birth unit (Wrekin), our stand-alone birth unit at the Royal Shrewsbury Hospital or home birth.

Staff redeployed to achieve CNST incentivisation:
4.6 WTE were 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.

Sickness
Maternity sickness across the service is 5.95% having risen steadily since the summer from a rate of 3.95% following a period of heightened media scrutiny, the main reason for absence being mental health issues (34%). Maternity leave is static at approximately 13.0 WTE.

Safety and Risk Assessment
Following the Transitional Model (1st July 2017-31st December 2017) the maternity service reverted to the pre-existing model of staffing the buildings across the County in January 2018. This meant that the service reverted to enacting its Escalation Policy, to ensure safe staffing of all units at all times. Midwifery staff were redeployed on an ad-hoc basis, in line
with Escalation Policy in order to provide safe care where it was required, as the majority of women continued to give birth in the consultant unit or two larger MLU’s. This unfortunately resulted in lack of certainty for women and their families and also for staff, hence the suspension of some services since June 2018.

**Delay in progress to implement CCG Led MLU review and Public Consultation**
The service awaits the outcome of the CCG Led MLU Review, which could change the model of care provision; however, this still requires a period of consultation and time to implement. This consultation did not run alongside the Future Fit consultation and as such caused further delay. The delay has been highlighted as a risk to both the Clinical Quality Review Meeting (CQRM) and the MLU Review Programme Board. It is currently anticipated that this consultation will take place in May/June 2019.

**Update on engagement and communications**
A comprehensive communications and engagement plan was implemented, the outcome of which was fed back to the Trust Board in October 2018.

**Recommendations to Trust Board**
Due to the extended delays in the public consultation on the CCG Led MLU Review the Care Group recommends that the current service suspension is maintained until such a time as the outcome of the CCG Led MLU Review is known and implemented.