Reporting to:	Trust Board – May 2018	The Shrewsbury and
Title	Telford Hospital Update on current position - Maternity Services MLU's May 2048 ust	
Sponsoring Director	Deirdre Fowler - Director of Nursing, Midwifery & Quality	
Author(s)	Sarah Jamieson Head of Midwifery Jo Banks - Care Group Director	
Previously considered by	Jo Banks - Care Group Director	
Summary	Staffing activity & safety Since t	he 1st January 2018, 98% of wome

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. In order to avoid suspending services, the care group have explored options to cover sickness and absence by either requesting part-time staff to do extra hours (Approx. cost 50-60K/month) or asking staff to 'sleep in' at the smaller MLUs either before or after a day shift. This was tolerable in the very short term, however is unsustainable in the long term. As a result of continued sickness and maternity leave levels the service is unable to sustain the 3 smaller MLU's remaining 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. However this proves unsatisfactory for both women and staff alike.

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 26.01.18 – 12 hours Ludlow 26.01.18 – 12 hours Oswestry 28.01.18 – 12 hours Bridgnorth 06.02.18 – 12 hours Oswestry 09.02.18-10.03.18 Ludlow 10.03.18 - 25.03.18

Oswestry 27.03.18 - 28.03.18 Ludlow 07.04.18 - 08.04.18 Oswestry 21.04.18 - 06.05.18 Ludlow 22.04.18 - 20.05.18 Oswestry 06.05.18 - 20.05.18

NILIC

Escalation Forecast

In addition to the above suspensions the maternity service is unable to cover shifts due to the numbers of staff on sickness ranging from circa 4% to 7% in some areas. and maternity leave circa 13.5 wte. From the 20th May over a 4 week rota there are 45 shifts uncovered across Bridgnorth, Ludlow and Oswestry and 95 shifts uncovered across Telford and Shrewsbury. Escalation will be invoked to cover these shifts, in order to maintain safe staffing levels across the service, meaning that Bridgnorth, Ludlow and Oswestry will have inpatient care suspended ie births and inpatient postnatal care.

.

Summary cont.

Delay in progress to implement CCG MLU review and Public Consultation

The service awaits the outcome of the CCG MLU Review, which may 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 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 will 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 to 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
- 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.

Recommendation to the Board

Due to the extended delays in the public consultation on the MLU Review and the continued escalation despite some of our services being suspended, the Care Group has carefully considered all of the above recommendations. Due to concerns raised regarding the varied opinion on the potential that the Trust engagement plan may undermine the outcome of the CCG Led MLU, NHSE and NHSI have requested a meeting on June 7th with the CCG's and Trust representatives. We will be seeking to reach a collective decision which considers the implementation of a trial of an on-call model, thereby exercising the Trusts objective to offer a service which safely supports maternal choice. Additionally, the Trust is willing to respond to any formal directive from the Commissioners to adapt the current model of maternity service provision in the MLUs.

The Care Group recommend that the outcome of the meeting on June 7th is known before proceeding to engagement on the 'on call' midwifery model.