

Agenda Item No 9

<u>Dudley Health and Adult Social Care Scrutiny Committee – 26 September 2012</u>

The Dudley Group NHS Foundation Trust Maternity Update

1.0 Purpose of Report

To update the Committee on the Trust's progress to manage maternity demand.

2.0 Background

As per previous papers which laid out the requirement to restrict our maternity bookings to ensure we continue to provide safe, effective care for women and their babies.

3.0 Update

3.1 Following discussions with the Black Country Commissioning Cluster, restrictions were placed upon bookings from a specified number of GP practices in Sandwell which are closer to City Hospital than Russells Hall Hospital (RHH).

Following the restrictions implemented in December 2011, there has been a clear drop in births per month at RHH for Sandwell women, not surprisingly City Hospital report an increase in their births. Dudley GP practices were not restricted and no complaints were received from Dudley women.

Unfortunately, the capping has not had the full impact desired as Dudley births have fluctuated in recent months but with an overall upwards trend.

A maternity strategy business case has been drafted for submission to our Trust Board (scheduled for October 2012) outlining options ranging from maintaining restrictions on bookings to the expansion of services to accommodate predicted maximum potential activity. This has involved significant planning and balancing optimum service capacity, choice and quality with realistic financial requirements has taken detailed research and analysis. As would be expected all proposals in the business case indicate significant financial implications to address maternity activity long term.

It is the desire of The Dudley Group to maintain the excellent reputation it has for high quality maternity services and to continue to meet the choices of women who wish to deliver here. Therefore the emerging preferred option outlined in the business case is for the maternity unit to expand into part of a neighbouring ward space, increasing the bed capacity by 12 beds.

Predicting longer term activity levels and therefore workforce requirements has not been a clear process. Sub-regional projections suggest that between 2009 and 2016, the number of births in Birmingham and Arden will continue to grow (by +4% and +3% respectively) whilst there will be reductions in the Black Country (by -1%), Staffordshire (by -2%) and most notably in West Mercia (by -6%) (NHS West Midlands, May 2011).

A further report released September 2011, by Dr Angela Moss, Senior Public Health Intelligence Specialist states that the ONS birth projections for Dudley show a static level of births to 2020, which is lower than the level of births now reported in 2010. This piece of work looks at a range of scenarios to estimate birth projections and concludes that it would seem live births in Dudley may continue between 3700 and 3800 for the next few years.

Based on the above regional predictions and the available facilities/capacity of local competitors, it is not clear that RHH will be required to meet any higher demand than it was experiencing at its peak in 2011/12, in fact predictions are that births in this area will likely drop over the next four years. It is for this reason that the business case outlines options that will be able to safely manage activity levels to a maximum of 5,300 deliveries per year.

4.0 Guidelines

4.1 Safer Childbirth guidelines

5.0 **Equality Impact**

5.1 Once set the Maternity Strategy will be clear and will apply equally. An Equality Impact Assessment is being carried out.

6.0 Recommendation

- 6.1 For information
- 6.2 Reassurance that we are working with stakeholders to provide the safest possible care for Dudley women.
- 6.3 Reassurance that current pressures have not impacted on service quality

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