

**Bath & North East  
Somerset Council**



**Bath and  
North East Somerset**  
Clinical Commissioning Group

# Transforming Maternity Services Together

Our proposal for change

**B&NES Health and Wellbeing Select Committee**  
**21<sup>st</sup> November 2018**

Healthier. Stronger. Together



**WORKING  
FOR CARERS**  
Accredited Employer

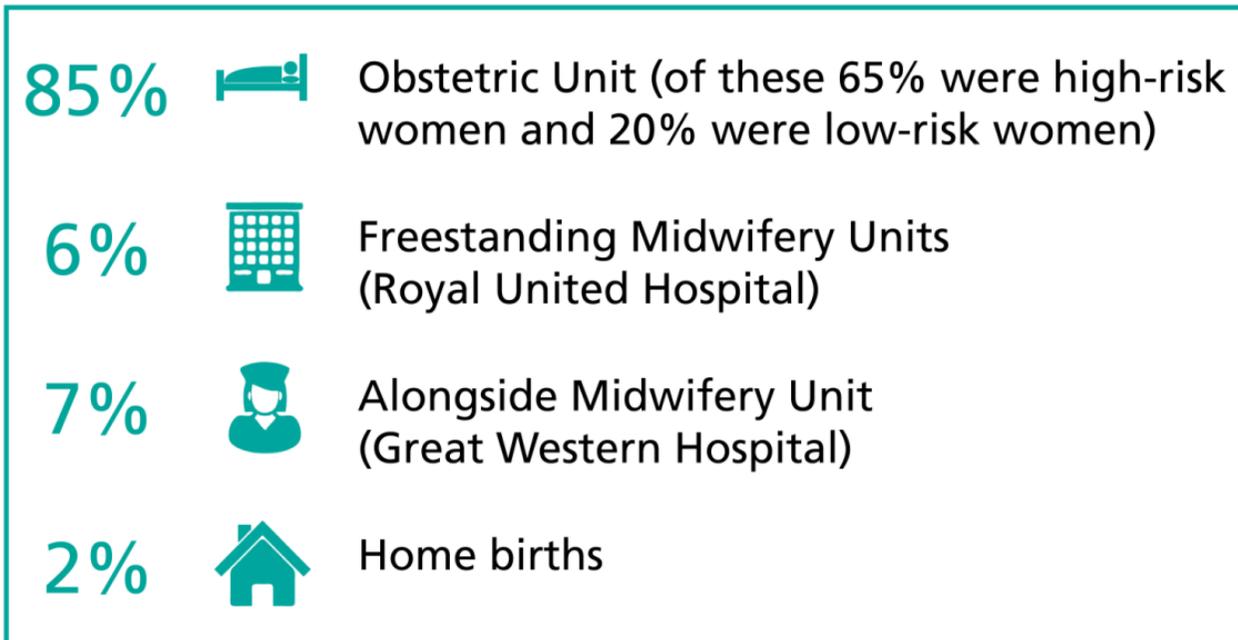
# Our Journey so Far

- We began talking to women and families in 2017 about their experiences of pregnancy, labour and birth across the counties of B&NES, Swindon and Wiltshire
- We have now worked with over 2000 women and families, plus our staff and partner organisations
- Their feedback, together with national guidance such as 'Better Births', has led to development of a proposal for future maternity services across the BSW region
- Partner organisations include Great Western Hospital Trust, Salisbury District Hospital, Royal United Hospital Bath, and B&NES, Swindon and Wiltshire CCGs



# Choice of place of birth

- 11,200 births in B&NES, Swindon and Wiltshire



- Increasing pressure on services in our obstetric units at Royal United Hospital and Salisbury District Hospital
- Less women choosing our Freestanding Midwife Lead Units
- Lack of parity across the Local Maternity System

# Changing clinical needs

- Average age of a woman giving birth is now 35
- More and more high risk pregnancies (eg high blood pressure, diabetes, obesity) which need medical support in a hospital setting
- Clinical deliveries, such as ventouse and forceps, are not possible at Free-standing Midwifery Units, nor is epidural pain relief



65%

Mother or baby at increased risk of health problems



50%

First time mothers who need to transfer from midwife led community hospital unit to obstetric unit in hospital for extra medical support with their birth

- 9 Post natal beds available in the community:



5 in Paulton



4 in Chippenham

Empty **95%** of the year

# Right staff, right place, right time

- We don't always have right staff in the right place at the right time to offer the services women want to receive and we want to provide. This is a particular challenge for Royal United Hospital
- Staff have told us what works well and what needs to change
- We have the right number and mix of staff, but they're not based in the right locations, so we can't provide service we want to and is not efficient use of our staff
- RUH staff currently supporting births across four community midwifery units, the hospital obstetric unit and home births, 24 hours a day, 7 days a week - often staffing empty buildings and empty beds



# Right staff, right place, right time

- RUH in a 24 hour period – actual staff numbers, clinics, home visits, births

 7th March 2018

	Maternity Care		On call	Births	Clinics	Home Visits
	Midwives	Assistants				
RUH Bath					n/a	n/a
Bath Community Team			0	0		0
Chippenham Birth Centre						
Trowbridge Birth Centre				0		
Frome Birth Centre			0	0		
Paulton Birth Centre				0		

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# Issues

- Staff too busy looking after empty beds and buildings or travelling from community hospitals with very low births to extremely busy obstetric units, often at short notice, which they dislike
- Frustrating for staff – effect on morale, retention and skills
- We want to increase opportunity for home births but staff are not able to promote and support due to existing working patterns
- Birth rates expected to increase – an additional 200 births a year
- Due to small number of births in community hospitals, cost of supporting these births is higher than Obstetric unit
- We're not giving women the service they want



# Our proposal

# 1

- Continue supporting births in 2, rather than 4 Community hospital units
- Women will be able to deliver their baby at **Chippenham or Frome**
- Antenatal and postnatal clinics will continue at Chippenham, Trowbridge, Frome and Paulton
- Trowbridge and Paulton proposed as pilot sites for our new community hub model of care
- Detailed analysis to support decision to continue to support births at Chippenham and Frome



## Our proposal

# 2 & 3

- To create **two new Alongside Midwifery Units**, one at **Salisbury District Hospital** and one at **Royal United Hospital Bath**
- Will provide more women with opportunity for midwife-led birth. Two new units will be in addition to the White Horse Alongside Midwifery Unit at Great Western Hospital
- Allows women easy access to obstetric unit if required, without need to be ambulanced whilst in labour

Around 800 babies are born at our obstetric units in Bath, Salisbury and Swindon every month



## Our proposal

# 4 & 5

- We propose to **improve our range of antenatal and postnatal services**, eg more breastfeeding support, to women in their own homes, and to develop community hubs to enhance our antenatal and postnatal care
- We want to **support more women to give birth at home** if that is their preferred choice



2%

women have their baby at home



# Our proposal

# 6

- We're proposing to **replace our community postnatal beds at Chippenham and Paulton** with support closer to or in women's homes.

# 9



there are 4 postnatal beds at the FMU in Chippenham and 5 at Paulton FMU

# 95%



of the time beds in our FMUs are unused or empty as women rarely need to stay in community hospital after giving birth

# 89



beds available at our Obstetric Units at our local acute hospitals for women who need them

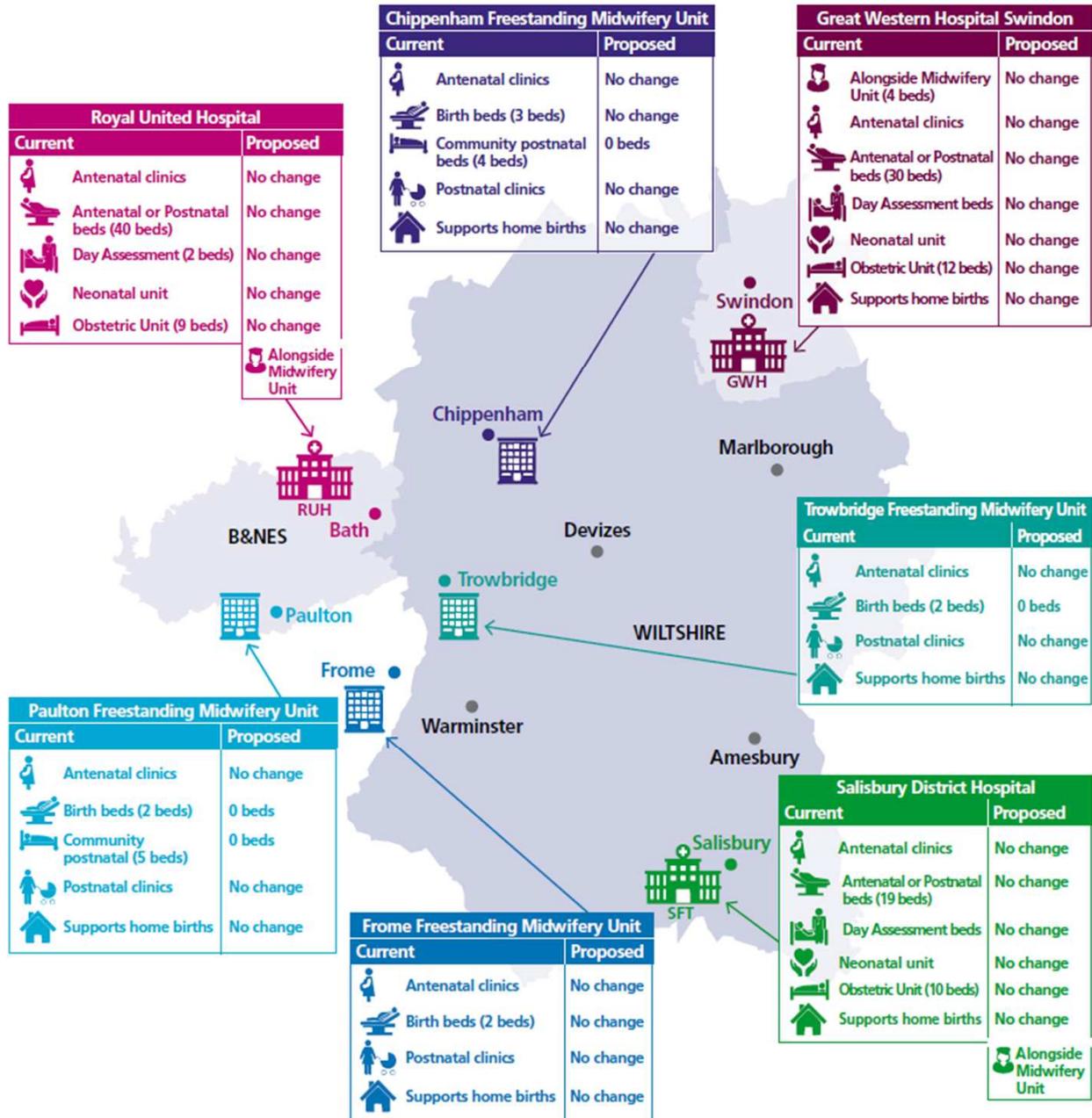
- Women who need to be admitted for medical treatment after giving birth would continue to be treated at their local obstetric unit at one of the acute hospitals at Bath, Salisbury or Swindon



# Benefits of our proposal

- We can provide **more choice** for more women across our area about where and how they are supported **before, during and after the birth of their child**
- We can make **better use of our resources and workforce** so we can further improve our antenatal and postnatal and birth services
- We can **improve continuity of care and carer** for women
- We can **enhance and improve our home birth service**
- **Free up our staff**, so they are able to **maintain their skills, improve their motivation** and provide the services they want to women who need them





# Future finances

- We are **NOT** planning to **reduce how much we spend** on maternity services
- We are **NOT** **reducing the numbers of staff** we have
- We are **NOT** **closing any buildings**
- We want to make more efficient use of our existing budget, resources and our staff to provide more services, not less for women and families across our area.

£42.6m spent on  
maternity services  
across B&NES, Swindon  
and Wiltshire in 2017/18

11,000 women  
supported to give birth  
locally in 2017/18



## If we don't change ...

- There will continue to be a difference in choice, quality and access from across B&NES, Swindon and Wiltshire
- Miss out on: meeting recommendations and best practice set out in national guidance, improved continuity of care and carer, improved birth place environment, improved support for breastfeeding
- The current model will continue to cost us £1million more a year

**We won't be providing the changes that women and families and our staff have told us they want us to make**



# We want to hear your views



- Consultation runs from 12 November to 24 February 2019
- Information on our website: [www.transformingmaternity.org.uk](http://www.transformingmaternity.org.uk)
- Consultation documents, key facts documents, response forms
- Public Consultation Events
  - Monday 10<sup>th</sup> December 2-4pm Victoria Hall, Church Street, Radstock
  - Thursday 29<sup>th</sup> November 5.45pm – 7.45 pm, The Oasis Conference Centre, Building E6, RUH



# Keynsham and Chew valley

Some women in Keynsham and parts of Chew Valley will choose to be cared for by one of the Bristol midwifery services

These women will have 3 birthing options – including:

- Obstetric unit at St Michael's and Southmead Hospitals
- Midwife-led alongside units at both of the above
- Freestanding Midwife led-unit in Cossham Community hospital
- Community based antenatal and postnatal services

