

PRESS RELEASE – for immediate release

07 February 2019

Hundreds have their say on proposals to transform local maternity services

Our Transforming Maternity Services Together Consultation comes to an end on 24 February 2019, so there is still plenty of time to have your say on the proposal for changes to maternity services across the Bath and North East Somerset, Swindon and Wiltshire Local Maternity System (LMS).

We've already heard from over 1000 people, who have shared their views through our online survey, written to us or attended one of our public events, drop in sessions or market stalls. We've also been out and about capturing the views of people in our local communities.

Lucy Baker, Acting Director for Maternity Services at Wiltshire Clinical Commissioning Group and Lead Director, said: "We would like to thank all the people who have taken the time to complete our survey so far, but we are keen to hear from as many people as possible, in particular those who are planning to start or grow their family in the next few years.

"We want to enhance the experience we provide for people using and working in our maternity services and provide more choice for more women.

"We've been really clear that we're not proposing to reduce how much we spend or reduce the amount of staff we have. We know that people value having services in their local community and we are not proposing to close any buildings as a result of this proposal – we're proposing to continue providing maternity services in Chippenham, Frome, Paulton and Trowbridge.

"You can find everything you need at www.transformingmaternity.org.uk. We are encouraging people to take a few minutes to read through the information or view one of our short videos. You can also have a look at the kind of questions people have been asking and our responses."

Sandy Richards, Transformation Midwife for the Bath and North East Somerset, Swindon and Wiltshire LMS said. "As part of our consultation, we have been keen to talk to as many mums and families as possible to gain their views of our proposals.

"We are seeing a decline in the number of women choosing to give birth in a Freestanding Midwifery Unit. On average only one baby is delivered every two or three days in each of these units but they need to be staffed to support births 24 hours a day seven days a week. Proposing to support births in two rather than four of our Freestanding Midwifery Units means women will still have this choice, but we can also free up underused staff and resources to enhance our antenatal and post-natal and birthing services.

"We know that many women and families are concerned at the possibility of having to transfer from a Freestanding Midwifery Unit to an Obstetric Unit if labour is not progressing well or more support is required. That's why this proposal includes creating an Alongside Midwifery Unit at the Royal United Hospital in Bath and Salisbury District Hospital, so more women who have a low risk of complications in labour and are otherwise fit and healthy could have a midwife-led birth, and staff in our Obstetric Units can focus on mothers who need to have their baby in this environment."

The proposal offers the following:

- **To continue to support births in two, rather than four, of our Freestanding Midwifery Units across Bath and North East Somerset, Wiltshire and Swindon. Women will still be able to have their baby in Chippenham and Frome Freestanding Midwifery Units**, and antenatal and postnatal clinics will continue to be provided in all four – at Chippenham, Frome, Paulton and Trowbridge as well as all other current locations e.g. GP practices.

A detailed independent travel impact analysis was undertaken to inform our proposal to continue supporting births in two of the Freestanding Midwifery Units.

- **To create two new Alongside Midwifery Units**, one at Salisbury District Hospital and one at the Royal United Hospital. These will enable women to have a midwife-led birth in a more relaxed setting without medical intervention but if support from doctors is needed there is direct access to the Obstetric Unit. These two units will be in addition to the White Horse Birth Centre that already exists at the Great Western Hospital in Swindon.
- **To improve the range of antenatal and postnatal services**, for example by providing more breastfeeding support to women in their own homes. We also want to support more women to give birth at home if this is their preferred choice.

- **To replace the nine community postnatal beds (four at Chippenham and five at Paulton Freestanding Midwifery Units)** with support closer to or in women's homes. Women who need to be admitted for medical treatment after giving birth would be treated in their local Obstetric Unit at one of our acute hospitals in Bath, Salisbury and Swindon. **95%** of the time postnatal beds in our Freestanding Midwifery Units are empty as women rarely need to stay in a community hospital after giving birth. **89 antenatal or postnatal beds** are available at our Obstetric Units for women who need them.

Lucy said: "We believe this proposal will considerably enhance the experience we provide for people using and working in our maternity services. It will allow us to offer more choice for more women, enhance antenatal and post-natal care and ensure we have the right resources in the right place at the right time. You might agree or disagree with our proposal, or have an idea to share - whatever your view is, we'd like to hear from you."

The consultation closes on 24th February 2019. The responses will be carefully and independently analysed and the results used to help the Governing Bodies of Bath and North East Somerset, Swindon and Wiltshire Clinical Commissioning Groups make a final decision by late spring 2019.

-Ends-

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Notes for Editors:

- This press release is issued by Wiltshire Clinical Commissioning Group on behalf of the Local Maternity System, the NHS organisations that plan and buy health services as well as those that provide or manage maternity services across Bath and North East Somerset, Swindon and Wiltshire. This includes Great Western Hospitals NHS Foundation Trust, Salisbury NHS Foundation Trust, Royal United Hospitals Bath NHS Foundation Trust and Bath and North East Somerset, Swindon and Wiltshire Clinical Commissioning Groups. Wiltshire Clinical Commissioning Group is leading the consultation process on behalf of the Local Maternity System.

- The proposal has been developed after listening to the views of women, families and staff over the last two years by all the NHS organisations that plan and buy health services as well as those that provide or manage maternity services across Bath and North East Somerset, Swindon and Wiltshire.
- Over the past 18 months, we have worked with over 2000 women and families, our staff and partner organisations from our Local Maternity System to develop our future plans for maternity services. Their feedback, along with national guidance, such as “Better Births”, has led to the development of a proposal for the future delivery of maternity services across our region.
- All the consultation information and documents, including ways to get involved and to provide feedback is available at: www.transformingmaternity.org.uk
- **Post-natal bed occupancy.** We use the standard NHS definition of bed occupancy – the proportion of available (open and staffed) beds occupied at midnight on a bedded ward. Between Jan 2017 and December 2017, post-natal community beds in Paulton and Chippenham were occupied for 5% of the available time.

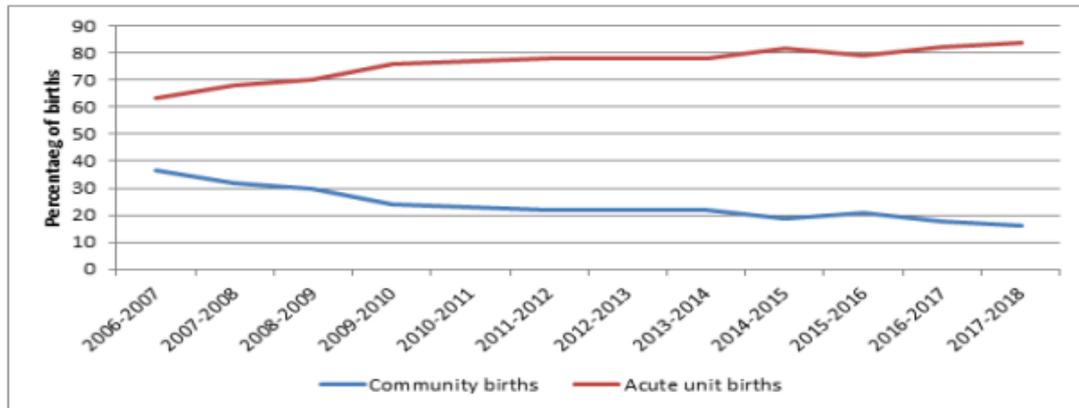
Table: RUH post-natal bed usage – occupied at midnight January to December 2017

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Total bed days available	279	252	279	270	279	270	279	279	270	279	270	279	3,285
Bed days used Paulton	3	9	6	7	7	4	8	8	3	2	6	4	67
Bed days used Chippenham	10	9	15	10	5	11	12	11	11	5	2	4	105
Percentage utilisation (%)	4.7	7.1	7.5	6.3	4.3	5.6	7.2	6.8	5.2	2.5	3.0	2.9	5.2

Source: BSW LMS Pre-consultation business case, page 23

- **Decline in number of births at Freestanding Midwifery Units.** We are seeing a decline over time in the number of women who chose to give birth in a freestanding midwifery unit, with under 6% of births in Bath and North East Somerset, Swindon and Wiltshire occurring in a Free Standing Midwifery Unit in 2017/18. This equates to 14% of all births overseen by the Royal United Hospital. Over the years we have used a number of strategies to promote and encourage births Freestanding Midwifery Units but despite this, the number of births in these units has continued to decline, as show in the graph below.

Figure 8: Place of birth percentages for RUH, comparing Freestanding Midwifery Units to the Obstetric Unit from 2006/07 to 2017/18



Source: Transforming Maternity Services Together Pre-Consultation Business Case, page 31

- **Travel Impact Analysis** - We asked the South Central and West Commissioning Support Unit, an independent organisation, to undertake an in depth Travel Impact Analysis to help us understand which Freestanding Midwifery Units should continue to support births. The Commissioning Support Unit looked at factors such as demand for services, travel times and other factors. The analysis showed that across our Local Maternity System, currently 83.4% of the female population of childbearing age live within 30 minutes of a birth unit, based on peak driving times and 93.7% at off-peak times. Continuing to support births in Frome and Chippenham rather than all four Freestanding Midwifery Units makes the least difference to travel times as 81.8% of the female population would still be within 30 minutes of a unit at peak times and 93.4% at off peak times.

Source: Transforming Maternity Services Together Pre-Consultation Business Case, page 55 -61

Enclosed

- Have your say graphic.
- Map of proposed changes.
- Image of baby and mother.
- Image of Lucy Baker, Acting Director for Maternity Services at Wiltshire Clinical Commissioning Group and Lead Director.
- Image of Sandy Richards, Transformation Midwife for the Bath and North East Somerset, Swindon and Wiltshire Local Maternity System.