Report to: East Sussex Health Overview and Scrutiny Committee (HOSC)

Date: 30 November 2007

By: Director of Law and Personnel

Title of report: Fit for the Future – progress update

Purpose of report: To summarise developments in relation to the Fit for the Future

process in East Sussex. To highlight recent national publications in

relation to maternity care.

#### RECOMMENDATIONS

### **HOSC** is recommended to:

1. Note the developments in relation to Fit for the Future.

# 1. Background

- 1.1 HOSC has a statutory duty to respond to East Sussex Primary Care Trusts' (PCTs') consultation on Fit for the Future proposals for obstetrics, gynaecology and special baby care, making recommendations based on the evidence available.
- 1.2 On 10 October 2007, HOSC held a special meeting to consider the Committee's response to the PCTs, based on information obtained at a series of evidence gathering meetings running from May to September 2007. At the October meeting HOSC agreed a series of recommendations to the PCT Boards on issues which the Committee believes should be taken into account when the Boards are considering the various potential configurations of services. HOSC did not endorse any particular configuration of services, but recommended that the PCT Boards undertake a full assessment of the additional potential options which had emerged during the consultation process.
- 1.3 Shortly after the 10 October meeting, HOSC published a full report summarising the evidence the Committee had gathered and the conclusions and recommendations drawn from this. The report was made available on the HOSC website, circulated widely to HOSC's stakeholder database and publicised via the local media. Copies of the report were sent to the PCT Boards.

# 2. Developments in the PCTs' process

- 2.1 The PCTs have been undertaking further work to clarify and assess the potential additional options put forward by a range of stakeholders during the consultation process. On the 5 November 2007 the PCTs held a meeting where the proposers of each additional proposal were invited to present their option to the PCT Boards. The meeting was broadcast on the internet and is still available to view on the following link: <a href="http://www.southeastcoastfff.nhs.uk/Home/East-Sussex/Documents.aspx">http://www.southeastcoastfff.nhs.uk/Home/East-Sussex/Documents.aspx</a> (7th item on list video of presentations).
- 2.2 PCT Board papers for November 2007 confirm that the PCT Boards plan to consider all the available evidence in detail prior to making a decision at a joint Board meeting towards the end of this year. The papers also draw the Boards' attention to the HOSC recommendations and confirm that these, as well as the findings from the public consultation, will be considered at the joint decision-making Board meeting.

### 3. Recent national publications in relation to maternity services

3.1 Since the conclusion of HOSC's evidence gathering programme, some important national publications have been issued which provide further information on expected standards in relation to maternity services.

- 3.2 In September 2007 the National Institute for Health and Clinical Excellence (NICE) published their guidance on Intrapartum Care. A short extract from the 'quick reference guide' of this lengthy document is attached at appendix 1 for information and the full document is available from http://www.nice.org.uk/quidance/index.jsp?action=byID&o=11837.
- 3.3 Also in September 2007 the Academy of Medical Royal Colleges published 'Acute Health Care Services: Report of a Working Party'. This looked at the full range of acute services but contained a section specifically looking at obstetrics this is attached at appendix 2.
- 3.4 In October 2007, The Royal Colleges of Obstetricians and Gynaecologists, Midwives, Anaesthetists and Paediatrics and Child Health published the final version of their joint guidance document 'Safer Childbirth'. The earlier draft version of this guidance was included in the review of key national evidence commissioned by HOSC from the Office for Public Management. However, some changes have been made in the final version, the Executive summary of which is attached at appendix 3. The full version is available from <a href="http://www.rcog.org.uk/index.asp?PageID=1168">http://www.rcog.org.uk/index.asp?PageID=1168</a>.
- 3.4 Particularly relevant to the East Sussex context is the final wording of the sections in the main part of this report on obstetrician staffing in units of less than 2500 births per year. The document states:
  - (para 4.2.6) "In obstetric units supporting relatively few births (less than 2500/year), a consultant continually present on the labour ward may be difficult to justify. However, this document strongly recommends 40 hours of consultant (or equivalent) obstetric presence and this should be mandatory if the unit accepts high-risk pregnancies. To ensure the best use of resources, both financially and in terms of manpower, individual units should perform a risk assessment exercise and should plan labour ward presence compatible with the needs of the unit. For rural and remote areas, there should be clearly defined criteria for the type of patients considered to be suitable to give birth in local units and transport arrangements agreed."
- 3.5 These publications provide additional background information and evidence to inform the PCTs' decision making and any future review of the PCTs' decision undertaken by HOSC.

#### 4. Recommendation

- 4.1 **HOSC** is recommended to:
  - 1) Note the developments in relation to Fit for the Future.

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