

Fit for the Future – assessment of alternative proposals

Dr Roger Elias – representing ‘options 6 and 7’

Copy of text from email received 16 January 2008

Dear Councillor Tidy

Thank you for asking me to comment on the "Fit for the Future" proposals. It is my opinion that the PCTs have been exemplary in exploring all the proposals put forward and have certainly given me a full opportunity to question them on all issues arising from this process.

It is my unequivocal opinion that the proposals they are putting forward will bring about a better service than at present and will ensure that obstetric care in East Sussex in the future will be of an extremely high standard.

The strength of their reasoning is such that I am persuaded that my proposals would if implemented would have led to a less safe service.

Dr Roger Elias

Mr David K C Chui’s response to PCTs’ assessment of Options 6 & 7

16th January 2008

I believe the PCTs have conducted a fair and adequate assessment of the Options 6 and 7, that were proposed by Dr Elias and myself.

I was given ample opportunities to present the case for options 6 and 7, both to the initial “New Options Assessment Panel” (chaired by Prof Stephen Field) and finally to the PCT Executive board in November 2007.

I support the PCTs’ decision to have one single “acute Obstetric Consultant-led unit”, which will undoubtedly improve quality and standard of maternity care in the area.

I can also appreciate the rationale behind the PCTs’ decision to have a midwifery-led unit (MLU) within Eastbourne, while the consultant-led unit will be based at the Conquest Hospital. The exclusion of an intermediate-site MLU, as that proposed in options 6 & 7, seems however to be mainly based on financial grounds.

I would like the HOSC and the PCTs to reconsider the following arguments:

The disadvantages of an Eastbourne MLU are as follows:

- Longer distance to travel when transporting patients between the MLU and the consultant-led unit, in acute obstetric emergencies (when compared with intermediate-site MLU)
- The possibility of untrained medical and nursing staff dealing with acute obstetric emergencies, if the MLU is sited within Eastbourne DGH, leading to potential substandard care and serious untoward incidents
- Hastings residents are virtually excluded from the services provided by the MLU in Eastbourne, due to the distance factor

The advantages of an intermediate-site MLU, which will be based on the Crowborough MLU model, are:

- Shorter transfer time, thus allaying most of the fears of delay in accessing emergency obstetric specialist care for patients attending the MLU
- Equally accessible for both Eastbourne and Hastings mothers-to-be, and their families, thus providing more choices for all East Sussex residents

Thank you for your consideration of these points.

Mr David K C Chui
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