PCT Update Report

East Sussex HOSC Meeting June 16th 2008

1. Maintaining safe services pending the outcome of the Secretary of State's decision

Mr Zaidi, Clinical Director, Women's Health, East Sussex Hospitals Trust (ESHT) has provided a risk assessment relating to staffing issues. He reported ongoing difficulties in recruiting and retaining staff for the middle grade rota, and short term problems with long term sickness. The Directorate continue to rely on agency middle grade locum cover, non-agency NHS locum cover and the good will of the existing middle grades to provide cover and maintain patient safety. Elective gynaecological work will continue to be cancelled as and when necessary. He highlights concerns over the sustainability of the current service configuration.

The PCTs are working closely with colleagues from ESHT to minimise the risks associated with maintaining services in their present configuration pending the outcome of challenges to the Boards' decisions.

- The PCTs are already providing interim funding for two middle grade posts to offset the immediate impact of Modernising Medical Careers.
- The PCTs have also agreed that the 3% efficiency savings required of all NHS services should not be required of the Women's Health Directorate. There has also been an overall 8% increase in NHS funding of Maternity Services through the national tariff and a new national tariff for home births. Taken together these will provide a substantial increase in funding this year.
- The PCTs have provided funding for six additional midwives and are working with ESHT to develop a plan to achieve Birthrate Plus levels of midwife staffing.
- The PCTs are providing specific support for the costs of the midwifery led unit in Crowborough.

2. Implementing the Boards' decision to 'strengthen the provision of ante and post natal care and in particular develop further community outreach services, which will include health visiting and community midwifery, and ensure that these services are staffed accordingly'

2.1 Governance

Whole systems governance has been put in place following best practice principles for programme management. The over-arching Programme Board, which oversees the delivery of the decisions of the Joint Committee of the two East Sussex PCTs under the chairmanship of the PCT Chief Executive, met for the first time on May 13th. The work of the programme is being taken forward through a series of sub-groups.

2.2 Strategy Development

A Maternity Strategy Group has been established, in line with the Boards' decision of December 20th to develop broader maternity strategy for the PCTs, with a particular emphasis on implementing the Boards' decision to 'strengthen the provision of ante and post natal care and in particular develop further community outreach services, which will include health visiting and community midwifery, and ensure that these services are staffed accordingly' and on implementing Maternity Matters.

This group is now well established, with membership from the NHS, Children's Services and significant user representation, as well as links to neighbouring health communities.

The group has undertaken an extensive baseline assessment, using tools developed to support the implementation of Maternity Matters.

Emerging priorities are:

- The need to develop robust plans to outpost midwives in community settings (Children's centres where possible).
- Strengthening outreach services for socially excluded groups, and adopting progressive universalism so that more disadvantaged families have additional support
- Putting in place systems that will support early assessment of pregnant women, including direct access to midwives

- Improving the range of choices and convenience of postnatal care
- Ensuring that all women are offered choice between team and midwifery led care and that this is backed up by sufficient capacity to make those choices possible including enough staff trained and confident to offer care in these ways
- Ensuring women are individually supported throughout their labour and birth
- Ensuring that there are sufficient numbers of midwives and support staff working flexibly across community and hospital settings
- Reducing the number of women smoking during pregnancy
- Improving support to breastfeeding and increasing the number of women still breastfeeding at 6-8 weeks and three months.
- Substance misuse services focussed on the needs of pregnant women and families with young babies

The group is also developing metrics that will allow us to track performance and progress. This work builds on the Fit for the Future indicators agreed with the SHA (measures that track the impact of the agreed configuration changes). These have been supplemented with a Maternity Dashboard, under joint development with ESHT, to help frontline staff focus their attention on key performance measures in more or less real time. Finally a series of Fit for the Future indicators have also been developed focussed on the maternity strategy, which will track our progress towards a high quality service that meets the requirements of national guidance, in particular Maternity Matters.