



*Eastbourne, Hailsham and Seaford CCG  
Hastings and Rother CCG  
High Weald Lewes Havens CCG*

**Report:** **Better Beginnings reconfiguration of maternity and paediatric services:** progress report on the implementation of the service reconfiguration

**To:** East Sussex Health Overview and Scrutiny Committee (HOSC)

**From:** Amanda Philpott, Chief Officer for Eastbourne, Hailsham and Seaford CCG and Hastings and Rother CCG  
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**Recommendations:** The HOSC is asked to note the improvements outlined in the report and the action to address recommendations made by HOSC in implementing the agreed service configuration as an outcome of Better Beginnings.

## 1. Glossary

A&E	Accident and Emergency Department
BBA	Born Before Arrival / Assistance
BSUH	Brighton and Sussex University Hospitals NHS Trust
CBC	Crowborough Birthing Centre
CCG	Clinical Commissioning Group
EDGH	Eastbourne District General Hospital
EMU	Eastbourne Midwifery Unit
ESHT	East Sussex Healthcare NHS Trust
HOSC	East Sussex Health Overview and Scrutiny Committee
LOS	Length of Stay
MLU	Midwifery Led Unit
MSW	Maternity Support Worker
MTW	Maidstone and Tunbridge Wells NHS Trust
NHS	National Health Service
SSPAU	Short Stay Paediatric Assessment Unit

## 2. Background

2.1 Throughout 2012, the NHS Sussex Together programme reviewed maternity and paediatric services across Sussex as part of their programme of work. They concluded that there was a pressing need to change maternity services at East Sussex Healthcare NHS Trust (ESHT) to ensure that patients using these services received high quality, safe and sustainable levels of care. The “pressing need to change maternity services in ESHT” was recommended due to particular

- pressures on middle grade staffing, medical trainee numbers and experience, and the number of Serious Incidents.
- 2.2 The CCGs in East Sussex led a review of maternity and paediatric services in the County. This included an extensive programme of clinical and public engagement which commenced in July 2013. In March 2013, ESHT took a decision to temporarily reconfigure its maternity and paediatric services on the grounds on patient safety; this was implemented in May 2013.
- 2.3 In 2014, the three CCGs in East Sussex held the 'Better Beginnings' public consultation on the sustainable future of maternity, inpatient paediatric and emergency gynaecology services. A review of the clinical evidence, and of the findings from the public consultation, resulted in the CCGs' Governing Bodies unanimously agreeing on the following configuration of services:
- Birthing services retained at all three current sites (Crowborough, Eastbourne and Hastings)
  - Consultant-led maternity services provided at the Conquest Hospital, Hastings
  - Two midwife-led birthing units provided at Crowborough and Eastbourne
  - Short-stay paediatric assessment units provided at both Eastbourne and Hastings
  - Inpatient (overnight) paediatrics, the special care baby unit and emergency gynaecology co-located at the same site as the consultant-led maternity service.
- 2.4 This was supported by HOSC, who agreed this decision was in the best interests of local health services.
- 2.5 Following the agreement of the configuration of services, the CCGs created a 'Better Beginnings Improvement Board.'<sup>1</sup> The Board gathered the recommendations of the HOSC and feedback from the public into an action plan to support both the CCGs and the Trust in improving services, which the Improvement Board has been overseeing through regular meetings and delegated workstreams. Progress on the action plan is included at Appendix 3.
- 2.6 In addition to overseeing service improvements, the CCGs continue to monitor the quality and performance of all commissioned services, including maternity and paediatrics, with a particular emphasis on gaining assurance about the on-going safety and sustainability of these services.
- 3. Purpose**
- 3.1 The purpose of this report is to update the HOSC on service improvements to date (most of which have now been completed), and remaining improvements that are incorporated into Trust delivery plans.
- 3.2 The CCGs and the Trust continue to monitor the quality and safety of services, and for the assurance of the HOSC a *Quality and Safety Report*<sup>2</sup> is appended.

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<sup>1</sup> The Better Beginnings Improvement Board includes clinical and executive membership from each of the three CCGs in East Sussex, East Sussex Healthcare NHS Trust (ESHT) and a HOSC councillor member.

<sup>2</sup> [Appendix 3](#): Maternity and Paediatrics *Quality and Safety Report*, March 2015

This provides summary quality information and evidence of the impact of the agreed configuration.

#### **4. Key areas for action**

4.1 This section of the report is divided into key areas for action that have been grouped into:

- Midwifery Care Pathways
- Access to urgent paediatric care
- Communications plans to support the changes.

##### ***Midwifery Care Pathways***

- 4.2 A key finding from the consultation and also a recommendation from the HOSC was that the maternity pathways for women in the North Weald should be improved to reflect women's cross-border scanning and birthing choices.
- 4.3 The Better Beginnings Improvement Board established a Midwifery Care Pathways Working Group<sup>3</sup> which has worked with local providers to evaluate and improve midwifery care and pathways for all women in East Sussex, including a review of the care pathways for the MLUs in Eastbourne and Crowborough.
- 4.4 Together with providers and a patient representative, the group has designed and agreed a pathway that is intended to support an excellent service for women in East Sussex, regardless of whether their care pathway crosses county borders.
- 4.5 The Group has also explored ways that the current issues might be helped in the short-term, for example improved access to sonography and clearer choices for women around ante and postnatal care or preferred place of birth.
- 4.6 The midwifery teams will continue to work to minimise issues with cross boundary care. Information for women and their partners has been developed and improved, including information about the birthing options available to them and what would happen in the event of a transfer being required. A final agreement from all providers regarding the improved pathway of care is anticipated in April 2015. It is expected that the new pathway will address the key issues raised during consultation, for women in the North Weald choosing to give birth at Crowborough.
- 4.7 The midwifery led unit in Eastbourne is working well and there are mitigations in place to support cross-border working for both low and high risk Seaford women booked at BSUH. This includes women receiving local antenatal care from ESHT midwives after attending BSUH-run clinics in Peacehaven to book at the Royal Sussex County Hospital in Brighton. Routine scans are done by ESHT's sonographers, with bloods and any additional scanning undertaken by BSUH.

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<sup>3</sup> The Midwifery Care Pathways Working Group is chaired by Dr David Roche (GP and Governing Body Member of High Weald Lewes Havens CCG). Membership includes patient representation and the Heads of Midwifery from ESHT, MTW and BSUH.

Local scanning is already available at EDGH for women booked with ESHT, and this will remain in place. Learning from this is informing progress on developing pathways between providers for women in the Crowborough area.

- 4.8 Other actions that were already in place, or have been implemented since the CCGs' decision include:
- risk assessments are undertaken throughout the antenatal pathway to establish preferred place of birth and birth plan in line with clinical need and women's choice
  - a named midwife system is in place
  - obstetric clinics continue to be provided at all three sites, unchanged from the pre-reconfiguration model
  - facilities are available on all three sites to allow partners to stay overnight
  - space is available where women in early labour can stay, rather than going home, where appropriate
  - a workforce development plan is in place which supports the recruitment of midwifery and obstetric (and paediatric staff)
  - at the Conquest there are two reserved parking slots immediately outside the delivery suite for women in labour and increased short stay bays close to the maternity entrance.

### ***Access to Emergency Paediatrics***

- 4.9 The Better Beginnings Programme Board established a Paediatrics Working Group<sup>4</sup> to review how and when patients were accessing inpatient paediatric and SSPAU services, and to consider how access could be improved in line with patients' needs.
- 4.10 A detailed review of the data was undertaken to test whether children were being seen in the most appropriate setting for the care that they needed. This assessment indicated that many children could be managed more comfortably by paediatric nurses in the community (e.g. those coming in for planned treatment such as IV antibiotics or wound dressings). Similarly, many children with minor conditions would be most appropriately managed in primary care or in the community, if the right services were available.
- 4.11 Key findings from the group's work included:
- Peak times of demand for the SSPAU tend to be between 9am and 11am and 3pm and 8pm

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<sup>4</sup> The Paediatrics Working Group was chaired by Dr Mark Barnes (GP and Governing Body Member for Eastbourne, Hailsham and Seaford CCG). Membership includes clinical and executive representation from the CCGs and the Trust.

- The length of time children spent on the SSPAU ranged from 10 minutes to 8 hours
  - The majority of children spent around 2-3 hours in the SSPAU
  - Weekend activity at the SSPAU is small with an average of 8 children attending the unit over a full weekend
  - On average 22 children per month are transferred from the EDGH SSPAU to the Conquest Hospital. This figure is in line with previous information provided to the HOSC
  - The majority of child transfers occur towards the end of SSPAU opening times if, following treatment, overnight care is required.
  - Of the children admitted to the inpatient unit, over 50% stay in hospital for under one day.
- 4.12 This gave rise to a wider piece of work that has been initiated to ensure that the approach incorporates how children and families access urgent services more generally, so a comprehensive pathway is developed that includes:
- enhanced GP and primary care provision
  - enhanced community paediatric nursing provision
  - enhanced paediatric provision in A&E
- 4.13 This whole model will ensure that children are treated appropriately in the right setting for their care. The work is progressing with a view to agreeing the model by the summer of 2015.
- 4.14 The agreed current services, including the opening hours of the SSPAU, remain unchanged in the interim and the quality and safety of the service continues to be monitored.
- 4.15 Other actions that were already in place, or have been implemented since the CCGs' decision include:
- a GP Education Programme on common illnesses requiring paediatric care and paediatric pathways is being rolled out across East Sussex
  - a review of community paediatric nursing provision, including a review of the hours this service is available
  - outreach staff in place as a point of contact between parents and hospital consultants through the children's community nursing services
  - stay-over beds available as appropriate for parents with children at the inpatient unit.

### ***Communications and Engagement***

- 4.16 The CCGs developed a communications and engagement strategy which was supported by the HOSC. The agreed outcomes of the communications and engagement strategy have been completed, with the exception of a final wider piece of communications work which will be undertaken to inform stakeholders how the actions relating to the HOSC and consultation recommendations have been delivered, and to conclude the Better Beginnings programme.

- A birthing choices leaflet has been designed and tested with the patient group; the leaflet includes:
  - Information about birthing choices
  - Information on transfer protocols, explaining what happens if a transfer is required during labour
  - The promotion of normal births
  - Guidance for partners on staying overnight with their partners
  - Information on when to travel and early labour
- The CCGs are commissioning the development of an information app for healthcare services in East Sussex which will include appropriate information about maternity and paediatric services.
- The Trust website is under on-going review; the following updates have been made:
  - virtual tours of the maternity sites (these are also being updated)
  - breastfeeding information is up to date (the Trust has also successfully recruited a feeding specialist)
  - support regarding birth planning
  - the promotion of normal births
  - up to date information regarding paediatric services and pathways
- There is also improved communications for families and users of maternity and paediatric services, including:
  - appropriate information regarding travel to and from services
  - information about the loan of baby seats

## **5. High quality, safe, sustainable services**

5.1 The CCGs and ESHT continue to monitor these services and agreed indicators across a range of measures are regularly reported to the CCGs' Governing Bodies and the Trust board. These quality reports demonstrate that the safety and quality of services has been sustained since the reconfiguration are publicly available on the organisations' websites. A report including the indicators agreed with HOSC can found at Appendix 3.