

Maternity Cap & Activity Update

3 December 2018



Agenda Item No: 7.7

Trust Board Report

Meeting Date:	Monday 3 December 2018
Title:	Maternity Cap & Activity Update
Executive Summary:	This (brief) paper outlines the discussion that has taken place with regard to the maternity cap and includes a prediction of births with the cap remaining in place. It confirms that the staffing establishment for the (current) proposed numbers of births is within guidelines, however staffing levels for midwives and middle grade doctors are likely to require an increase as numbers increase. This work will be undertaken in Qtr 4 and will be subject to normal Trust process for increasing staff.
Action Requested:	The Board can do one or more of the following: Receive and note
For the attention of the Board	This section requires a brief, focussed summary of the points of fact for the Board plus any/all of the following:
Assure	<ul style="list-style-type: none"> The Board that there has been a discussion on the birth numbers for the Trust.
Advise	<ul style="list-style-type: none"> The Board that the maternity cap will remain in place until March 2019, when this will be revisited. The discussion in March 2019 will require staffing review for midwifery and clinical teams.
Alert	<ul style="list-style-type: none"> N/A
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Links to Trust Strategic Objectives	<ol style="list-style-type: none"> Create a culture of compassion, safety and quality Proactively seek opportunities to develop our services To have an effective and well integrated local health and care system that operates efficiently Attract, retain and develop our staff, and improve employee engagement Maintain financial health – Appropriate investment to patient services Be in the top 25% of all key performance indicators
Resource Implications:	None.
CQC Domains	<p>Safe: patients, staff and the public are protected from abuse and avoidable harm.</p> <p>Effective: care, treatment and support achieves good outcomes, helping people maintain quality of life and is based on the best available evidence.</p> <p>Caring: staff involve and treat everyone with compassion, kindness, dignity and respect.</p> <p>Responsive: services are organised so that they meet people's needs.</p> <p>Well-led: the leadership, management and governance of the organisation make sure it's providing high-quality care that's based around individual needs, that it encourages learning and innovation, and that it promotes an open and fair culture.</p>
Equality and Diversity Impact	None
Public or Private:	Public
Other formal bodies involved:	Local Maternity System.
NHS Constitution:	<p>In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none"> Equality of treatment and access to services High standards of excellence and professionalism Service user preferences Cross community working Best Value Accountability through local influence and scrutiny

Report Details

1 The Trust board has asked for an update on the maternity bookings in the Trust and to seek assurance that the organisation has reviewed the need for the booking cap to remain in place in light of the news that Walsall Manor Hospital lifted their booking cap in September. The Board have also asked for confirmation that staffing levels are within national guidance for the expected births.

The Trust placed a cap on the number of bookings in January 2018.

The table below details the numbers of bookings taken in the last three months, with August and September being within tolerance levels. October has seen an increase in bookings.

The numbers of deliveries have shown a reduction in September and October. The booking for these births were taken at week 12 of the pregnancy. It should be noted that the number of bookings does not always translate to the same number of births.

Maternity booking and Deliveries.

Activity	Tolerance			Aug 18	Sept 18	Oct 18
	Green	Amber	Red			
Number of Bookings	<450	450-470	>471	421	432	484
Number of Mothers Delivered	<416	417-419	>420	455	420	416

Review of the Cap

In October the directorate and Divisional team met to discuss capping / capacity at RWT with the Chief operating Officer (COO). Following a discussion surrounding birth forecasts the decision was made to maintain capping arrangements for RWT for Women outside of the Wolverhampton borders excluding the 6 Willenhall GP surgeries.

The table below indicates the forecast number of deliveries for the next five months.

The birth forecast for 18/19 has been predicted as >5145. Birth rates are being monitored closely.

Following Walsall Healthcare trust (WHT) lifting their cap in September – RWT have not seen any significant impact in the reduction of bookings or women transferring care from RWT – WHT from the Willenhall 6 GP's.

Activity	Tolerance			Nov 18	Dec 19	Jan 19	Feb 19	Mar 19
	Green	Amber	Red					
Number of Mothers Delivered	<416	417-419	>420	445	377	419	363	437

Review of staffing.

In light of the proposed birth rate of approx. 5145 there has been a discussion with regard to staffing levels to ensure safety and quality in the department. There are nationally set guidelines for the numbers of midwives and consultant cover for maternity units. The Trust does not meet the guidance for the number of hours of consultant cover on the labour ward and this is recognised via the Trust risk 4756. This risk details the actions and mitigation in place, of which one of the key actions was to implement the booking cap.

The risk assessment for staffing levels are currently amber and are deemed to be safe. However in light of the fact that local birth rates are likely to increase rather than decrease in future years and that there will be no significant changes in other referrals patterns, the department need to complete their skill mix review for midwives, middle grade cover for the maternity unit and also consultant hours provided on the labour ward.

Business cases for all three are in development and will follow the Trusts business planning process in Qtr 4. Initial indications are that there will need to be further investment in staffing levels at midwife, consultant and junior staffing level (middle grade doctors)

The Trust Board are asked to note the content of this report and detail of the additional investments required will be shared once the skill mix reviews and business planning rounds have been completed