Wiltshire County Council

Health Overview & Scrutiny Committee Wednesday 8 September, 14:00

Referral of Maternity Service Development Plans of Kennet & North Wiltshire and West Wiltshire Primary Care Trusts

Report by the Kennet & North Wiltshire Health Scrutiny Panel

1. Purpose of Report

- 1.1 To inform the Wiltshire Overview & Scrutiny Committee (WCC OSC) of the Kennet & North Wiltshire Health Scrutiny Panel's (KNW HSP) recommendation that the decisions taken by Kennet & North Wiltshire Primary Care Trust (KNW PCT) Board regarding the future of maternity services, be referred to the Secretary of State for Health in accordance with the regulations outlined in the guidance for Overview & Scrutiny of Health.
- 1.2 To explain the rationale behind the KNW Health Scrutiny Panel's recommendation.

2. Background Information

- 2.1 At a series of three meetings held in the summer of 2003 West Wiltshire Primary Care Trust (WW PCT), the provider of maternity services to parts of Wiltshire, Somerset and Avon, indicated that the current service was too costly to maintain and invited the purchasing PCT's to state their future commissioning intentions.
- 2.2 KNW PCT immediately announced its intention to review the services provided in its area, and to date it has been the only PCT to do so.
- 2.3 On 30 January 2004, following the announcement that the KNW PCT would be conducting a maternity service review, WCC OSC agreed to wait until the full findings had been made available and decisions had been taken, before considering this matter further.
- 2.4 The KNW HSP was given the delegated authority to monitor the progress of the service review and report back to the WCC OSC at this time.
- 2.5 The review is now complete and the KNW PCT Board met on 27 July 2004 to reach its final conclusions. At this meeting the PCT Board agreed to:
 - a. Note the outcome of the maternity services consultation, and acknowledge the strength of feeling expressed by a proportion of the PCT's 209,500 population in response to the proposals.
 - b. Approve an interagency work programme:
 - To address the development of Children's Centres in line with the forthcoming Children's NSF.
 - ii. To commit to a joint project with Wiltshire County Council to improve information and availability of transport options, and to map future health-related transport demand.
 - iii. To progress with Swindon PCT and Swindon & Marlborough NHS Trust, the proposal for a self-contained environment in the Great Western Hospital for midwife-led care. If this unit is not provided alternative arrangements will be reviewed.

- iv. To approve an action plan for work in progress.
- c. Maintain day care midwife centres in Chippenham and Devizes. The Board would wish to see flexible opening times, to be agreed in conjunction with midwives and others in the area.
- d. Approve the relocation of all birthing and postnatal inpatient activity from Malmesbury and Devizes to the Trowbridge and Chippenham Maternity Units with the earliest implementation date of 1st November 2004, and confirm these commissioning intentions to West Wiltshire PCT.
- 2.6 The KNW HSP subsequently met on 29 July to discuss the PCT Board's decision and resolved to carry out some further investigative work in order to establish whether the decision could be referred to the Secretary of State for Health under the terms of the Overview & Scrutiny guidance.
- 2.7 This initial work is now complete and the recommendation of the KNW Health Scrutiny Panel detailed below. In order to provide WCC OSC members with the KNW HSP's rationale behind its recommendation, this report deals with each of KNW PCT's proposals in turn and sets out the areas which Panel members are unable to sanction. A full list of the reference documents used by officers and members to carry out this assessment is included at Appendix 1.

3. Grounds For Referral

3.1 Grounds for referral to the Secretary of State for Health will be that the Overview and Scrutiny Committee believes the plans for the reconfiguration of maternity services by Kennet & North Wiltshire Primary Care Trust, and by West Wiltshire Primary Care Trust as the providers of that service, are not in the interest of health services in the areas.

3.2 Recommendation 'A' – Representing a Failure to Adequately Involve Patients and the Public

The Panel feels that the consultation process, and subsequent recommendations, has failed to adequately involve patients and the public in the development of future plans for maternity services in Kennet & North Wiltshire. Nor do the recommendations demonstrate that any of the comments, suggestions and proposals received by the PCT during the consultation process, have been used to formulate the final recommendations that were presented to the KNW PCT Board on 27 July. In this sense, Panel members, not to mention members of the public, have been left with the impression that, although the consultation process appears on the surface to have been thorough, in reality it has been of little value. This view is compounded by the fact that, at the KNW PCT Board meeting on 27 July, the Director of Strategic Service Change admitted that the decision had been taken for purely financial reasons.

- 3.3 In the build up to the public consultation the KNW HSP had expressed concern over the two issues detailed below at 3.4 & .3.5.
- 3.4 During the summer of 2003 a questionnaire was distributed to mothers from Kennet & North Wiltshire who had recently given birth. However, the KNW HSP and the Community Health Council, who were still operating at this time, advised that the views of future and potential service users should also be actively sought. This advice was not acted upon.
- 3.5 At the January Board meeting of KNW PCT one of the Non-Executive Directors suggested that a stakeholder group be set up to explore alternative options to the closure of the units at Malmesbury and Devizes. This suggestion was not acted upon and the final recommendations do not differ significantly from the original proposals that were put to the Board on 25 November 2003.

- 3.6 During the consultation period the PCT received a number of proposals to look at other models in the country, to establish whether services at Malmesbury and Devizes could be better promoted to improve usage. The PCT Board did receive a presentation from Richard Hallet, a Trustee of the National Childbirth Trust involved in the successful promotion of a similar unit in Crowborough, however it is understood that this was a truncated version of a more detailed and informative presentation given at a number of public meetings.
- 3.7 KNW HSP members feel that the KNW PCT has failed in its duty to actively involve patients in development of its plans for the future provision of maternity services. Panel members are also concerned that the PCT has somewhat invalidated its consultation process by merely agreeing to 'acknowledge the strength of feeling expressed' during the consultation, without incorporating any of the comments, proposals and suggestions received into its subsequent recommendations to the PCT Board. Moreover, the lack of consideration for the proposal to promote use of the units at every stage of the maternity review would seem to indicate that KNW PCT had no interest in retaining the units at any time. This is despite recent national guidance, which suggests that local community units are the preferred method for the delivery of maternity care to healthy, informed mothers.

3.8 Recommendation 'B' – Proposals Not in the Interest of the Health Service in the Area

The KNW Health Scrutiny Panel concluded that three of the four points detailed under this proposal are inappropriate alternative to the existing services, and are in some cases misleading.

3.9 Point 'I'.

The establishment of Children's Centres, in line with the forthcoming Children's National Service Framework, may offer valuable services to parents during and after pregnancy. However, much of this help and advice is already being given to parents by the midwives working within the community service and by the children and families teams working across the KNW PCT area. The PCT has given no indication that it has undertaken any assessment of the cost of establishing these centres, nor the location or number to be provided. Given the ongoing serious financial position of KNW PCT, the lack of any financial analysis in the context of this proposal is of extreme concern to the KNW HSP members, who fear that although the PCT may go on to 'address' this issue, there is no guarantee that the centres will materialise. The flimsy nature of this proposal indicates that it is not acceptable as an alternative to part of a well-established and successful service.

3.10 Point 'ii'.

Panel members have consistently, throughout the consultation and at other times, expressed concerns that the PCT has not taken responsibility for the many transport issues that would result from the implementation of its proposed relocation of services. Although the County Council is the statutory authority for transport, Government guidance, as laid out in the Rural Proofing Guidelines, states that policy-making bodies should apply the principles of the Rural Proofing Checklist to all proposals for service change. KNW PCT has not been able to demonstrate that any such impact assessment has been carried out in the case of the reconfiguration of maternity services.

3.11 The Government has asked highway authorities to carry out accessibility planning exercises to ensure that people have access to food, healthcare, employment and education. In order to assess this as accurately as possible, communities are divided into zones, and highway authorities must demonstrate that each zone has access to the four aspects crucial to sustaining healthy communities. WCC has undertaken to deliver its draft Local Transport Plan 2006-2011, including early analysis of the accessibility planning work, by July 2005, a full year after the KNW PCT Board's decision on the future of maternity services. The Panel feels that the recommendation approved by the PCT Board relies too heavily on the anticipated outcomes of the as

yet unpublished work of WCC. Health will be one of four elements, which the WCC Local Transport Plan has to consider. In this recommendation KNW PCT has failed to co-ordinate its plans for review and reconfiguration of its services with the existing work plans of its partner organisations. As a consequence, the PCT has not been able to give a complete picture of the impact of these proposed changes, either to its own Board or to the residents of Kennet & North Wiltshire.

3.12 Point 'iii'.

Panel members consider the third point, to progress with Swindon PCT and Swindon & Marlborough NHS Trust plans to establish a 'self contained unit in the Great Western Hospital for midwife-led care', to be the most seriously misleading. Members are concerned that it falsely indicates existence of an impending plan to build, or create, a new midwife-led unit at the Great Western Hospital, catering for mothers from Malmesbury, Wootton-Bassett, Cricklade, Purton, Marlborough, Pewsey and Devizes, as well as from the Swindon area. In reality, although Swindon PCT recognises that it cannot currently offer the choice of a midwife-led birth to its residents through its own services, neither does it consider the development of this unit to be a matter that warrants urgent attention. The Chief Executive of Swindon PCT, when called to the Swindon Health & Social Care Commission (equivalent of OSC), confirmed that it was not a priority for her organisation and stated that it would not begin to consider this proposal for at least two years. KNW PCT, at its Board meeting on 27 July, conceded that it was not within their gift to provide this unit. Given that the population and the birth rate in Swindon will continue to rise steadily, Panel members would question the capacity of a midwife-led unit at the Great Western Hospital to cater for KNW PCT mothers. The lack of a midwife-led service for Swindon mothers could provide the Malmesbury and Devizes units will another source of income, if there was commitment from provider and commissioner organisations to sustain and develop community services. KNW HSP members have been informed that the Swindon Health & Social Care Commission has agreed to form a Task Group to consider maternity provision in its locality, and would support any form of joined-up enterprise to ensure that there is widespread access to the full range of maternity services.

3.13 Recommendation 'C' – Represents a Decrease in Service Provision for Mothers in Malmesbury, Devizes and the Surrounding Areas, and is not in the Interest of the Health Service for the Area.

KNW HSP members note that, despite the continued use of the phrase 'enhanced day care facilities' throughout the course of the public consultation, the above proposal represents an overall reduction in services as there would no longer be 24 hour maternity care in either Devizes or Malmesbury. No indication of the flexibility of the day centre opening times has yet been given. However, it is clear that, under these proposals, the most reliable access to midwives in the future will be via the Trowbridge and Chippenham units. Clearly this will mean a considerable increase in travelling times for many parents and families, particularly at night or when the day centres are closed.

3.14 Recommendation 'D' – Represents a Decrease in Service Provision for Mothers in Malmesbury, Devizes and the Surrounding Areas, and is not in the Interest of the Health Service for the Area.

KNW Scrutiny Panel members do not feel that the closure of these two popular, award-winning units represents either an improvement in the overall maternity service provided to the population of Kennet & North Wiltshire, or the neighbouring PCT areas which have traditionally made use of these units.

4. Further Concerns

There are a number of further issues that impact greatly on the suitability of the recommendations, as adopted by KNW PCT, to adequately provide maternity services in Kennet & North Wiltshire.

4.1 Financial Situation

Panel members have for some time been concerned that, despite the critical financial crisis that KNW PCT has been in since its inception, the PCT has failed to successfully apply budgetary controls or to be able to keep track of its continuous overspends. This has resulted in the PCT Board having to authorise an investigation by the Audit Commission into the precise nature of, and reason for, its huge, unpredicted end of year overspend. At time of writing, Scrutiny officers at Wiltshire County Council had been unable to obtain a copy of the Audit Commission's report into the KNW PCT's current financial situation.

- 4.2 KNW HSP members are not been convinced that, given KNW PCT's inability to make any accurate predictions regarding budgetary overspend, any greater credibility can be attached to the predicted saving of approximately £300k from the closure of the two maternity units. Panel members would want to see evidence of a thorough and robust assessment of the PCT's budgetary control procedures, method of approximating savings from service changes and accurate costing of alternative arrangements, before any further closures, service reviews or consultations are undertaken.
- 4.3 The minutes of KNW PCT's own Audit Committee, as presented to the PCT Board in July indicated that KNW PCT and the Avon, Gloucestershire & Wiltshire Strategic Health Authority have not, as yet, agreed on a financial recovery plan for the PCT. KNW HSP members therefore question the rationale by which the PCT has elected to close services in order to make financial savings before the principles of the financial recovery plan have been finalised.

4.4 Government Guidance

Recent Government guidance has promoted the health benefits of a natural birth for mothers who have not experienced serious problems during pregnancy. Evidence also suggests that the advice and care given in midwife-led units leads to higher successful breast-feeding rates (and the improved health outcomes that sustained breast feeding has been shown to contribute to) and to greater confidence for new mothers in being able to care for, and cope with, their babies.

4.5 Government guidance also suggests that, for delivery of primary care, the NHS will continue to develop patient's needs closer to home and work, which seems to indicate that locally delivered low-tech maternity care is the government's preferred choice for healthy mothers with an effective primary care infrastructure at their disposal.

4.6 Impact on Wiltshire Ambulance Service

KNW PCT has stated, in its consultation documents, that implementation of their plans would have a beneficial outcome for the Wiltshire Ambulance Service, which has itself been beset by problems in recent years. This is primarily due to an assumption that, if more women are already situated at the Trowbridge or Chippenham units to give birth, transfer times to the Royal United Hospital in Bath for women experiencing difficulties would be considerably shorter than from either Malmesbury or Devizes. However, this does not take into account any possible increases in emergency calls to the Ambulance service by people who, had the Malmesbury and Devizes units been open, may have felt they could travel to the unit unaided, but are confident to undertake the longer journeys required to get to Chippenham or Trowbridge.

4.7 The PCT's plans have also failed to take into account any increase in home births and the likelihood that this will also result in an increase in calls to the Ambulance service.

4.8 Provider/Purchaser Responsibilities

Section 11 of the Health & Social Care Act, 2001, makes it clear that either WW PCT, as service provider, or KNW PCT, as commissioner, could have undertaken the consultation on maternity services. In reality, the public have experienced the rather confusing situation whereby WW PCT introduced the issue in a series of three meetings late in the summer of 2003, with KNW PCT then opting to carry out public consultation into the aspect of the WW PCT service which is delivered within their area. To date, no other commissioning PCT has opted to consult the public on the future of maternity provision. The effected the ability of those with a responsibility to scrutinise the effects of service changes to gain any conclusive insight into the overall impact on the future of the WW PCT service, as a result of the proposed closures by KNW PCT. The impact of any future reviews by Mendip, BANES and WW PCT's can not now be considered in relation to KNW PCT's own plans.

4.9 The patchy approach to the review of the midwife-led maternity service provided by WW PCT will present problems for all OSC's concerned and will lead to greater public confusion, with the potential for further loss of services.

5. Recommendation

5.1 Members are asked to consider the points raised in this report and to agree that they represent a basis for a referral to the Secretary of State for health on the grounds that the proposals adopted by the KNW PCT Board on 27 July 2004 are not in the interests of the health service in that area.