William Powell Assembly Member
Chair, Petitions Committee
National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

## P-03-318 Cross Border Maternity Services

Thank you for your letter of 29 June 2011 highlighting the Petition Committees consideration of the petition calling for the Welsh Government to engage with the 'Keeping it in the County' consultation process, and for seeking the views of the teaching Health Board on the proposed changes.

I attach for your information the letter of response to the consultation that the teaching Health Board submitted into the process. The letter summarises the involvement the teaching Health Board had during the consultation process and in particular the establishment of a response based upon:

- the views of the public who attended consultation events in Powys,
- the views of front line staff, many of whom are residents and some are service users themselves,
- the views of clinical leaders in the specialties in question,
- the views of other key stakeholders such as Welsh Ambulance NHS Trust; and
- the case for change put forward by the Shrewsbury and Telford NHS Trust.

One of the teaching Health Boards key objectives for its population is to help people to stay well. Our focus on public health is ever increasing and considerable efforts are being placed on ensuring the health and wellbeing of our population.

Where our population does need to access health services, we endeavour to provide these as local as possible. We are having considerable success in providing a greater range of services within Powys, whereby our population would previously have had to travel. We also have further work underway specifically in relation to maternity services to explore whether we can safely provide enhanced local services for care which women are currently travelling further afield to access.

Where more specialist care is required, we want our population to access the best care as near as possible. There is no doubt that there will be circumstances in which clinical practice developments mean that in order to access specialist services people will be required to travel. Although such changes to the way in which services are configured are likely to affect large parts of the Wales population, the rurality of mid Wales does bring this into sharp focus. The teaching Health Board is acutely aware of issues regarding access and is committed to both informing and influencing the debate and decisions in relation to service configuration.

I hope the information assists the Committee, however please do not hesitate to contact me for any further information you feel will assist or for any points of clarification.

Yours sincerely


Andrew Cotton Chief Executive

Bwrdd lechyd
Addysgu Powys

Our ref: AC/NT

11 March 2011

| Ms Jo Chambers | Mr Leigh Griffin | Mr Adam Cairns |
| :--- | :--- | :--- |
| Chief Executive | Chief Executive | Chief Executive |
| Shropshire County PCT | NHS Telford and Wrekin | Shropshire \& Telford |
|  |  | Hospital NHS Trust |

## Dear Colleague

## Consultation on "Keeping it in the County" - securing the future of hospital services in Shropshire, Telford and Wrekin

The purpose of this letter is to provide the formal response of Powys teaching Health Board to the above consultation document.

In compiling our response, we have drawn on a number of documents, discussions and presentations in order to provide as well informed a position as possible. This has included:

- The views of our clinicians who we acknowledge were consulted in the formation of the consultation document. In particular we have sought the views of those who actively provide treatment as part of the pathways of care associated with the Shrewsbury and Telford Hospitals.
- Presentation and discussion with our Board given by Adam Cairns and colleagues. We were grateful to Adam for taking the time to do this and a subsequent meeting that was held between the Chairmen and Chief Executives.
- $\quad$ The senior Executives from the Health Board attending the public consultation events that were organised by the Montgomeryshire Community Health Council in Llanidloes, Welshpool and Newtown. As we made clear at the events, our attendance was to hear the views of the public.

In the first instance we would like to acknowledge the issues that have led to the need for you to consider reconfiguring services. The drivers for change are not uncommon across the UK with many areas facing similar issues. We have been convinced, through your presentations and document, that doing nothing is not an acceptable option and that change in a number of areas is necessary. However, we are not at this stage in a position to fully support these proposals as we believe there remain a number of concerns that need to be resolved.

It is clear that your proposed resolution to the matters does, at this stage, disadvantage the population of north east Powys for whom we are responsible for securing services. In particular, we feel that the disadvantages are in terms of:

- Increased travel distance - whilst we accept that you need to take a whole population view of your catchment, the proposals do have a particular impact on those living on the western edges of your current catchment area. In addition, whilst the numbers of people affected can be argued as being relatively low in terms of episodes of hospital treatment, those episodes will be for the more severe situations which require longer and more intensive treatment. We are concerned that this will have a disproportionate impact on young families and their relatives. The distance increases will add additional stress to already stressful situations.
- Associated with the increased travel distance is an increased risk which you acknowledged. Evidence shows that in some situations the shorter the time taken to reach place of treatment, the more successful the outcome for the patient. At this stage, the plans do not include appropriate compensation particularly in terms of additional ambulance services.
- We are concerned that underlying the increased distance issue is a question over the longer term viability of two sites providing the more acute services and that the configuration you are proposing compromises both Shrewsbury's and Telford's positions.

Therefore, it is not possible for the Health Board to fully support the proposals without the specific issues being addressed.

## Maternity/Obstetric Services

From the information we have received the move appears to be generated by an economic calculation associated with replacing the obstetrics/neonatal block in Shrewsbury. From the presentations this emerged as a main driver for change for these services. In our view this has usefully highlighted a service quality issue that does need to be addressed and for which we would like to discuss what immediate steps
that can be taken to improve the facilities available to the women and babies of north Powys.

As part of our consideration, we have discussed the proposals with our midwifery service. As you are aware they are providing an acclaimed midwifery-led service which achieves recognised high levels of home and local birth centre midwifery-led births. Where hospitalisation is necessary it is also achieving a lower than average caesarean section rate. We acknowledge that this high quality service is part of a partnership between our midwifery-led services and your own obstetric-led services in Shrewsbury and that there are significant governing arrangements in place between the services.

However, it does need to be acknowledged that:-

- The proposal to move services to Telford will mean that midwives are spending more time out of their natural catchment area and that in order to sustain current levels of safety is likely to require additional resources which are not incorporated within your proposal.
- The additional travel times leads to there being a need to review risk thresholds which may, in turn, impact on demand figures that you are assuming.
- The existing service has been built up over a large number of years and is based on well established protocols and relationships. The change being proposed will be disruptive and the impact on these should not be under-estimated.

The issues related to the increased distance will have an impact on our ambulance services. Whilst the numbers of patient transfers involved are relatively low, at the point at which they occur, the incidents are often intensive and represent a significant drain on ambulance resources for a protracted period of time. This will need to be addressed ahead of any changes. As we discussed with Adam, there may be a need for us to work to achieve reciprocal arrangements between the West Midlands Ambulance Service and the Welsh Ambulance Service to ensure cross cover. There may well also be a need to increase the resources available to our ambulance services in order to maintain safety.

The final concern we have in relation to Obstetrics/Maternity services is the one of strategy. It is our responsibility to secure, for our residents, services that are safe and as accessible as possible. To this end we will consider whether pathways to other providers are of equal or increased benefit to our residents to ensure that we can compensate for any drift or move to Telford. Given the long history of links into Shrewsbury, we would like to see this process supported by yourselves and I am grateful that this dialogue has started.

## Children's Services (including neonates)

Some of the issues for children's services and neonates are similar to those as maternity services. Through the presentations it was made clear that the absolute numbers of episodes involved were fairly low and that there will remain a 24 hour assessment service within Shrewsbury. However, for those children and families requiring treatment in Telford, the level of intensity, the length of stay and the disruptive impact on vulnerable families is high. The operational planning associated with the move of children's services also appears to us to be one which is more complex as it represents the whole transfer of a service rather than from one site to another. It was also of concern to us that we have received copies of correspondence indicating some of lack of support for the proposals from your own clinicians. Clearly for such moves to work the majority of clinical support is required.

## Surgery

The moves being proposed for surgery do not disadvantage the population of Powys and also would be consistent with ensuring sustainable position in Shrewsbury. We are re-assured by you that the maintenance of critical care services on both sites could be achieved and that this did not represent a risk.

It is clear from the above that the key areas are in relation to moves of Obstetrics and Children's (inc Neonatal) services. From the information we have gathered, including our public's concern, we are of the view that there remain a number of issues that need to be addressed in advance of any final decision. Whilst we acknowledge that no moves would take place for 18 months, we believe that at this stage of consultation, the key questions we have raised should have been addressed. The Health Board is, therefore, not in a position to fully support your proposed configuration at this stage.

Yours sincerely


Chris Mann
Chair


Andrew Cottom Chief Executive

