

## **Extract of the HEALTH SCRUTINY PANEL**

### **MINUTES OF THE MEETING HELD ON**

### **6 OCTOBER 2008**

#### **14. STRATEGIC REVIEW OF MATERNITY AND NEONATAL SERVICES.**

Professor Rory Shaw (Chief Medical Officer at the Royal Berkshire Hospital) described the growing Maternity Service required to serve a population of approximately half a million people (Agenda Item 4).

In 2007/08, 5,986 babies were born at the Unit. The number of deliveries per day has risen from 12 deliveries in 2001 to an average of 18 per day in 2008/09. He described the unpredictability of births on any given day and the difficult nature of preparing to meet the demand.

It was explained how the local authority may be able to help with population predictions as this would assist with the accurate modelling of the future service. It was reported that once 6,000 births per annum has been reached, regulatory requirements insist on a certain unit size with appropriate staffing levels, etc. It is therefore helpful to know population predictions before committing to large-scale expenditure on developing the Unit.

Neonatal intensive care activity is also increasing, up from 376 admissions in 2003 to 615 admissions in 2007/08 and the hospital is charting these trends.

Professor Rory Shaw explained how women in labour occasionally are diverted to another hospital in a local network if the RBH has reached capacity. This may be Swindon, North Hants, Wexham Park, Oxford, High Wycombe, etc. A reciprocal arrangement is in place with these hospitals should they be at capacity. It was explained that diversions of this sort occur relatively infrequently. The term “closure” is often used within the media adding to the negative connotations of the practice.

Jill Valentine (Head of Midwifery) explained how women are not always happy about the prospect of being diverted to another hospital but are accepting when they realise the benefit of a unit which is not at full-capacity and can offer better one-to-one care.

Those West Berkshire residents using the Royal Berkshire Hospital maternity services equates to approximately 2,000 births. Equally, many West Berkshire residents chose North Hants Hospital in Basingstoke to deliver.

Members scrutinised a range of issues including:

- The likely impact of 10,500 new homes in West Berkshire on the birth rate for the area.
- The self-contained nature of the Unit and the fact that anaesthetists and other health professionals are fully operational within the Unit and rarely have the capacity to be deployed elsewhere in the hospital.
- The need to guarantee the same type of service at another hospital when a woman in labour is diverted from the Royal Berkshire Hospital.
- Whether the increasing population would allow for a midwife-led Unit operating out of the West Berkshire Community Hospital.

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- How out-of-area admissions are included within the increasing numbers seen at the neonatal service.
- The high temperature in the Rushey Ward delivery suite and opportunities for installing air-conditioning.

It was reported that the proposal to refurbish the Rushey Ward delivery suite included installing air-conditioning as part of the business case.

Bev Searle (Area Director NHS Berkshire West) described how the Public Health Information Manager may be able to assist the RBH in predicting demand, including new registrations for National Insurance numbers, etc.

### **RESOLVED that**

- (1) The Chief Medical Officer and members of the Royal Berkshire Hospital Maternity Service be thanked for their attendance at the Health Scrutiny Panel.
- (2) The item on the Review of Maternity and Neonatal Services be noted.