

# Transforming Maternity Services Together

Key facts about our proposal for change and how to have your say



[www.transformingmaternity.org.uk](http://www.transformingmaternity.org.uk)



Bath and North East Somerset, Swindon & Wiltshire  
Local Maternity System

We're proposing to make some changes to our maternity services, so we can provide more choice for more women, make sure we have the right resources, in the right place at the right time and enhance the experience we provide for people using and working in our maternity services.

We've based our proposal on feedback from over 2000 women and families, people who work in or with our maternity services and those with an interest in these services.

Read about the six different parts to our proposal on this side. Turn this leaflet over for why we are proposing these changes and how to have your say.

Find out more and read the full consultation document 'Transforming Maternity Services Together - our proposal for change' at [www.transformingmaternity.org.uk](http://www.transformingmaternity.org.uk)

# Our proposal

---



We are proposing to continue to support births in two, rather than four, of our Freestanding Midwifery Units. Women will be able to deliver their baby in a Freestanding Midwifery Unit at Chippenham or Frome. Antenatal and post-natal clinics will continue to be provided in Chippenham, Frome, Paulton and Trowbridge Freestanding Midwifery Units and all other community locations, such as GP practices.

We undertook a detailed analysis (which included looking at factors such as local demand for services and average travel times to the Freestanding Midwifery Units) to inform our proposal to continue to support births in Chippenham and Frome.

- 85% of women give birth in one of our three Obstetric Units and less than 6% give birth in one of our four Freestanding Midwifery Units.
- 83% of women of childbearing age currently live within 30 minutes of a place to give birth, based on travelling at peak times. This changes to 82% if only Chippenham and Frome continue to support births.
- On average only one baby is delivered in each Freestanding Midwifery Unit every two or three days.

## Our proposal

---

# 2

We're proposing to create an Alongside Midwifery Unit at the Royal United Hospital Bath.

# 3

We're proposing to create an Alongside Midwifery Unit at Salisbury Hospital.

This will provide more women with the opportunity to have a midwife-led birth.

Around 800 babies are born at our obstetric units in Bath, Salisbury and Swindon every month.



## Our proposal

---

4

We're proposing to enhance current provision of antenatal and post-natal services, for example by providing more breastfeeding support for women closer to, or in, their own homes.

5

We also want to support more women to give birth at home if this is their preferred choice.

2% of women have their baby at home at the moment.



## Our proposal

---

# 6

We're proposing to replace our community post-natal beds at Chippenham and Paulton Freestanding Midwifery Units with post-natal support closer to or in women's homes. Any woman with a clinical need for post-natal care will still be cared for at one of our acute hospitals in Bath, Salisbury or Swindon.

- There are four post-natal beds at Chippenham and five at Paulton Freestanding Midwifery Unit.
- 95% of the time beds in our Freestanding Midwifery Units are unused or empty as women rarely need to stay in a community hospital after giving birth.
- 89 beds are available at our obstetric units at our local acute hospitals for women who need them.

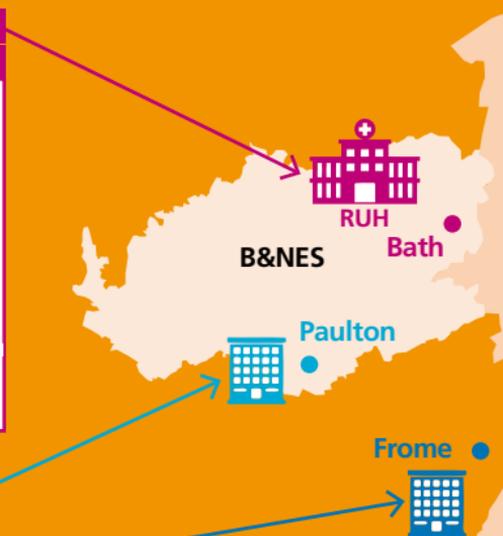


# The benefits of our proposal

The changes we are proposing will mean:

- We can provide more choice for more women across our area about where and how they are supported before, during and after the birth of their child.
- We can make better use of our resources and workforce so we can further improve our antenatal, post-natal and birthing services.

Royal United Hospital	
Current	Proposed
 Antenatal clinics	No change
 Antenatal or Postnatal beds (40 beds)	No change
 Day Assessment	No change
 Neonatal unit	No change
 Obstetric Unit (9 beds)	No change
	 Alongside Midwifery Unit



Paulton Freestanding Midwifery Unit	
Current	Proposed
 Antenatal clinics	No change
 Birth beds (2 beds)	0 beds
 Community postnatal (5 beds)	0 beds
 Postnatal clinics	No change
 Supports home births	No change

Frome Freestanding Midwifery Unit	
Current	Proposed
 Antenatal clinics	No change
 Birth beds (2 beds)	No change
 Postnatal clinics	No change
 Supports home births	No change



### Chippenham Freestanding Midwifery Unit

Current	Proposed
Antenatal clinics	No change
Birth beds (3 beds)	No change
Community postnatal beds (4 beds)	0 beds
Postnatal clinics	No change
Supports home births	No change

### Great Western Hospital Swindon

Current	Proposed
Alongside Midwifery Unit (4 beds)	No change
Antenatal clinics	No change
Antenatal or Postnatal beds (30 beds)	No change
Day Assessment	No change
Neonatal unit	No change
Obstetric Unit (12 beds)	No change
Supports home births	No change

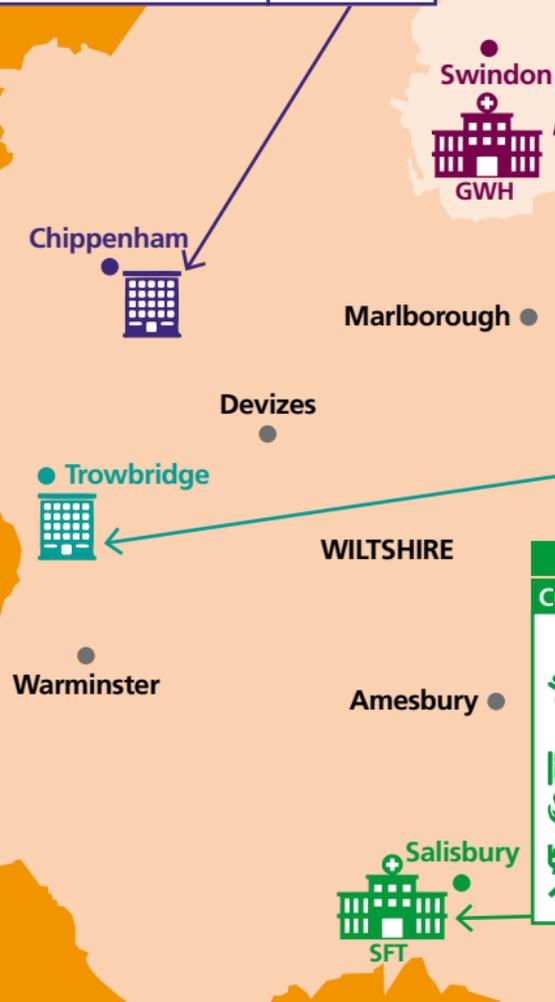
### Trowbridge Freestanding Midwifery Unit

Current	Proposed
Antenatal clinics	No change
Birth beds (2 beds)	0 beds
Postnatal clinics	No change
Supports home births	No change

### Salisbury District Hospital

Current	Proposed
Antenatal clinics	No change
Antenatal or Postnatal beds (19 beds)	No change
Day Assessment	No change
Neonatal unit	No change
Obstetric Unit (10 beds)	No change
Supports home births	No change

Alongside Midwifery Unit



# Jargon-buster

---

**Antenatal:** Pregnancy and the time before birth.

**Alongside Midwifery Unit:** Maternity services provided by midwives and maternity care assistants in a building located next to an Obstetric Unit. If support from doctors is needed there is direct access to the Obstetric Unit.

**Freestanding Midwifery Unit (FMU):** Maternity services provided in the community rather than at a main hospital site. Care in a Freestanding Midwifery Unit is provided by midwives and maternity care assistants. Any woman who is giving birth in a Freestanding Midwifery Unit and who needs the support of a doctor (for example, for an epidural or caesarean) would need to be transferred to an Obstetric Unit by ambulance.

**Obstetrician:** A doctor with special training in how to care for pregnant women and help in the birth of babies.

**Obstetric Unit:** This is a maternity unit that is staffed by a multidisciplinary team including midwives, maternity care assistants, obstetricians, anaesthetists and support staff. Care for women giving birth is often provided by midwives but doctors may be involved if needed.

**Post-natal:** This relates to the period of time following birth.

# About the Local Maternity System

---

This proposal has been developed by all the NHS organisations that plan and buy health services as well as those that provide or manage maternity services across Bath and North East Somerset, Swindon and Wiltshire. Together they make up the Local Maternity System.

These organisations have heard from over 2000 women and families, staff and healthcare partners with feedback about ways to improve the services we provide to mothers and families across the region. We want to provide:

- More equal access to the different birthing options available to women.
- Improved personalised care so women's wishes are heard and recognised.
- Continuity of care to improve the relationship between mother, family and midwife.
- Improved community support to provide targeted care close to home.
- Integrated and seamless care regardless of where and how women choose to give birth.

We can only deliver these improvements if we make some changes to how we currently do things.

## Future finances

---

Despite the financial pressures facing the NHS locally and nationally, we are not proposing to reduce how much we spend on maternity services, nor are we proposing to reduce the amount of staff we have or closing any buildings. We want to make more efficient use of our existing budget, resources and our staff to provide more services, not less for women and families across our area. Some of the changes we are proposing are because certain services are underused and we often staff empty buildings and beds.

By using our resources differently, we can make sure our maternity services meet the needs of women and their families now and in the future, and provide staff with a great place to work.

**£42.6m spent on  
maternity services across  
B&NES, Swindon and  
Wiltshire in 2017/18.**

**11,200 women  
supported to give birth  
locally in 2017/18.**



## Workforce

---

The views and experiences of our staff have helped shape our proposal, they want to be able to provide safe, high quality care before, during and after birth, in the best environment for each woman.

We believe we have the right number and mix of staff but they are not based in the right locations to deliver our future vision and ensure efficient use of our resources. Our Freestanding Midwifery Units are busy during the day providing antenatal and post-natal clinics. However at other times, particularly during the night, staff are rostered to cover areas where there is no or very little birth activity. At the Royal United Hospital and in the Freestanding Midwifery Units, staff often have to move around at short notice in order to provide a service 24/7 across four Freestanding Midwifery Units, an Obstetric Unit and to support home births.

More than  
500 midwives  
and midwifery  
assistants work  
across our area (full  
time equivalent).



## What our staff have told us

---

Our maternity team has told us that managing empty beds and buildings in our Freestanding Midwifery Units (which are busy with antenatal and post-natal clinics in the day but not with delivering babies) is not the best use of their time and expertise. They also told us that they find it demotivating when they do not have enough to do and are concerned they are not using their full range of midwifery skills all the time.

We know that continuity of care, whereby the same midwife supports a woman through her pregnancy, birth and post-natal period, leads to better outcomes for both mother and baby. However, currently we do not have staff in the right place at the right time to be able to offer this level of care to women and families.

Our proposal will free up staff to better support this type of care.



# The changing needs of our local population

There is increasing pressure on services at our Obstetric Units at the Royal United and Salisbury District hospitals. This is because we are seeing more and more high risk pregnancies (for example because of high blood pressure or diabetes) that require support in a hospital setting with an expert medical team available to step in if required. In addition, many women with a low risk pregnancy are also choosing to have their babies in an Obstetrics Unit because they are worried about having to move, by ambulance, to another site during or after their labour if they need the help of a doctor. We need to offer these women a safe, convenient alternative so staff at our Obstetric Units can focus on mothers who really need their care.

Great Western Hospital (in Swindon) already offers women an Alongside Midwifery Unit, providing midwife-led care with the peace of mind of knowing that obstetric, neonatal and anaesthetic teams are readily available if unexpectedly required. This will continue.

We have developed our plans to ensure our services are efficient and sustainable to support future population growth, changes in housing policy, and the repatriation of military personnel to South Wiltshire from April 2019.

- In 2017/18, 60-65% of births involved mothers or babies at increased risk of health problems.
- 50% of first-time mothers need to transfer from a midwife-led service to an Obstetric Unit for extra medical support with their birth.

## What happens next?

---

Once the public consultation has closed, the responses will be carefully analysed by an independent organisation and the results will be used to help the governing bodies of Bath and North East Somerset, Swindon and Wiltshire Clinical Commissioning Groups to make their final decision in Spring 2019.

We will make the consultation results available to the public and explain how everyone's feedback has helped shape our plans.

You can also contact us if you would like this document in an audio, large text or an Easy Read format or another language.



# How do I get involved?

---

During the consultation we want to hear from as many people as possible, whether they agree or disagree with our proposal. Please encourage your friends, family and work colleagues living in Bath and North East Somerset, Swindon and Wiltshire as well as neighbouring areas to read our consultation document and fill in our survey (either online or post your survey to us). This survey has been designed to make sure everyone's views can be fully considered before any decisions are made.

Completing the survey is just one way to take part. There will be many events across the region that people can attend, learn more at and have their say.

Visit [www.transformingmaternity.org.uk](http://www.transformingmaternity.org.uk) to find out more and complete our online survey.



Visit [www.transformingmaternity.org.uk](http://www.transformingmaternity.org.uk)



Read our 'Transforming Maternity Services Together' consultation document at [www.transformingmaternity.org.uk](http://www.transformingmaternity.org.uk)



Email [maternity.transformationbsw@nhs.net](mailto:maternity.transformationbsw@nhs.net)



Call 01380 736026



Write to Wiltshire CCG, Southgate House,  
Pans Lane, Devizes, Wiltshire, SN10 5EQ