

Subject:	Suspension of home birth service update	Date: 10 May 2020								
Prepared By:	Penny Cole, Head of Midwifery									
Approved By:	Julie Hogg, Chief Nurse									
Presented By:	Lisa Gowan, Divisional General Manager W&C									
Purpose										
To provide an update regarding suspension of the home birth service on 6 April 2020 <i>NB – date for recommencement of services has been requested by NHS England (Ruth May, 7 May 2020)</i>		<table border="1"> <tr> <td>Approval</td> <td></td> </tr> <tr> <td>Assurance</td> <td></td> </tr> <tr> <td>Update</td> <td>X</td> </tr> <tr> <td>Consider</td> <td></td> </tr> </table>	Approval		Assurance		Update	X	Consider	
Approval										
Assurance										
Update	X									
Consider										
Strategic Objectives										
To provide outstanding care	To promote and support health and wellbeing	To maximise the potential of our workforce								
	To continuously learn and improve	To achieve better value								
	X	X								
Overall Level of Assurance										
	Significant	Sufficient								
		Limited								
		None								
		X								
Risks/Issues										
Financial										
Patient Impact	Affects compliance with NICE CG190 around the provision of choice of birth place; high impact on very small number of individual patients									
Staff Impact										
Services	Temporary suspension of a standard service; safe alternative is available									
Reputational	Significant national interest in the provision of home birth services									
Committees/groups where this item has been presented before										
QIA presented to COVID 19 ICT on 6 April; updated QIA presented to COVID 19 ICT on 14 April										
Executive Summary										
<p>The W&C triumvirate are proposing that a restricted home birth service is introduced from 1 June 2020. This is in accordance with Phase 2 of the RCM/RCOG guidance and reflects an anticipated staffing shortage of 20-30%.</p> <p>The service will be restricted where nights on call are not fully covered, and managed on a case by case basis.</p> <p>An additional midwifery team is to be deployed using midwives from the acute service. This will distribute the staffing unavailability more proportionately across the maternity service and does not destabilise the acute service. Once the clinical induction is complete for this team, a full home birth service is expected to commence from w/c 29 June 2020.</p> <p>A further update will be presented to the ICT on 8 June 2020.</p>										

UPDATE

This paper provides a brief update to the ICT as a monthly review of the home birth service suspension which was agreed at ICT on 6 April 2020.

On 9 April 2020 NHS England and the RCM/RCOG published guidance around the provision of intrapartum services during the coronavirus pandemic. The RCM/RCOG guidance contained a clear framework for actions based on staff availability; the suspension of the home birth service at SFH was in alignment with Phase 3 of this guidance as during week commencing 6 April 2020 community midwifery staffing shortage was 35%.

Actions since 6 April 2020:

1. Weekly staffing forecast is now undertaken across all services in W&C Division and expressed as a percentage absence over the coming seven days. The maternity aspect of this forecast (including maternity support worker availability) is included in a national weekly report. The ICT is sighted on this information request and response.
2. Head of Midwifery has made contact with independent midwifery colleagues to discuss and agree options for independent support during this time, as recommended by NHSE/I (2020). As very few women are affected by the suspension, individual bank contracts have been proposed rather than tendering for 'long line' bookings of independent midwives.
3. A further options appraisal for independent midwifery support was discussed at CASCP and submitted to Bob Truswell on 25 April 2020; this reflects the action already taken with regard to bank contracts.
4. Engagement with the Maternity Voices Partnership (MVP) has taken place to ensure objective review of communications with women and reflection of an equitable approach to service changes. Information for women is regularly updated and visible on Trust internet and social media platforms.
5. Operational review of workforce to include deployment of midwives from acute service into community midwifery team. This team will commence from 1 June 2020 and helps to ensure that the staffing unavailability is more evenly distributed between acute and community services. Equipment is funded by the LMNS as part of wider maternity transformation agenda.

CONCLUSION

With the guidance framework and monitoring processes described, and the actions which have been undertaken since 6 April 2020, the W&C triumvirate are proposing that a restricted home birth service is introduced from 1 June 2020. This is in accordance with Phase 2 of the RCM/RCOG guidance and reflects an anticipated staffing shortage of 20-30%.

The service will be restricted where nights on call are not fully covered, and managed on a case by case basis.

Once the clinical induction is complete for the additional community midwifery team, a full home birth service is expected to commence from w/c 29 June 2020.

A further update will be presented to the ICT on 8 June 2020.

REFERENCES

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<https://www.nmc.org.uk/news/news-and-updates/joint-statement-on-expanding-the-midwifery-workforce/>

<https://www.england.nhs.uk/wp-content/uploads/2019/07/aace-national-framework-for-healthcare-professional.pdf>

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Birthplace in England Collaborative Group (2011) *Perinatal and maternal outcomes by planned place of birth for healthy women with low risk pregnancies: the Birthplace in England national prospective cohort study* British Medical Journal 343: (d7400)

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