Health and Community Services



19-21 Broad Street | St Helier Jersey | JE2 3RR

Deputy Mary Le Hegarat Health and Social Services Scrutiny Panel BY EMAIL

14 September 2021

Dear Chair,

Health and Social Security Scrutiny Panel: Follow up to quarterly public hearing

Please find below the responses to your questions on the Maternity Services Review following the Health and Social Security Scrutiny Panel quarterly public hearing dated 19 August 2021.

Maternity Services Review

- 3. It has been announced that the refurbishment of the Maternity ward commenced on Monday 16th August 2021.
 - a. Please could you provide some detail about the consultation undertaken with midwives, service users, and the Maternity Voices Partnership to obtain feedback on the proposed refurbishment plans.

A meeting took place with the Maternity Voices Partnership (MVP) and maternity staff regarding the planned works on 4 August 2021. The proposed work and design were based on previous consultations with staff and service users.

This work has been in the planning for around 7 years. The team have developed an open-ended feedback system which will run the course of the project with separate feedback mechanisms for staff and service users.

We have developed a communication strategy, with a voice over video showing in 3D, the new refurbished unit. This has been added to the maternity website (https://www.gov.je/Health/PregnancyAndBirth/GivingBirth/Pages/MaternityRefurbishment.aspx) and we have asked for local charities that support the Maternity Department to promote the video and feedback system.

Maternity Unit staff and the MVP will be asked to contribute to designing the internal décor and art works.

b. We understand that the 11-phase refurbishment will be fully complete by October 2023. Please could you outline why a 2-year timescale is required?

The phasing strategy was developed with the clinical leads, the User Care Group and the professional design teams based on the final design layout. This was to enable the safe refurbishment of the Maternity Unit whilst keeping it fully operational for the duration of the works, due in part to the lack of a decant facility which would have reduced the timetable for the overall programme, if available. As the specialist supporting services,

main operating theatre, recovery and staffing numbers could not be supported elsewhere on campus or island-wide, the resulting 11-phase programme was agreed.

The phasing strategy was heavily scrutinised and revised multiple times during the feasibility process to ensure that the minimum number of birthing rooms and patient beds were maintained at all times. Given the sensitive nature of the Maternity Ward activities, the phasing also needed to clearly separate the potential contractor access from staff and patient areas.

Yours sincerely,

Deputy Richard Renouf

Minister for Health and Social Services