

Women, Children and Family Care Group
Health and Social Security Scrutiny Panel Review
Response to request for information
26 February 2021

In response to Deputy Le Hegarat's letter on behalf of the Health and Social Security Scrutiny Panel to the Minister for Health and Social Services dated 15 February 2021, the responses to the questions posed are as follows:

1. How many births have taken place each year since 2015?

Indicator	Definition	2015	2016	2017	2018	2019	2020
Births	Deliveries with an outcome of 'Live'	1054	1024	958	928	878	863

2. How many miscarriages (that you are aware of) and stillbirths have occurred each year since 2015 ?

The data below in reference to 'miscarriage' refers to those women who were known to Maternity services at the time of their miscarriage. The information is only available from 2016 onwards.

Indicator	Definition	2015	2016	2017	2018	2019	2020
Miscarriage	Deliveries with an outcome of 'Spontaneous Miscarriage'	–	109	125	105	122	102
Stillbirth	Deliveries with an outcome of 'Stillbirth'	0	2	2	3	4	1

3. How many formal complaints have been raised each year since 2015 by parents in respect of the care provided whilst receiving maternity services?

Indicator	2015	2016	2017	2018	2019	2020	2021
No of Complaints	5	5	5	7	2	20	3

a) What were the nature of these complaints?

The nature of the complaints are categorised as follows:

Care related	17
Communication	5
Attitude & Behaviour	17
Confidentiality	1
Admissions/Appointment	3
Personal Records	1
Premises	1
Other	2

4. How many staff work within the Maternity Unit and Antenatal Clinic within the General Hospital (and what are their positions)?

Staff Position	No. of Staff
Consultant, Obstetrics and Gynaecology	6
Foundation year 2 doctors, Obstetrics and Gynaecology	2
Head of Midwifery	1
General Manager - Women and Children	1
GP Trainee/Speciality Trainee doctor (ST2) /Clinical Fellow	4
Healthcare Assistant – Maternity	9
Lead Midwife	1
Locum Staff Grade Obsterics and Gynaecology	2
Maternity Senior Secretary	1
Maternity Unit Receptionist	1
Midwives	50
Governance and Risk Manager	1
Senior HCA - General Midwifery	1
Sonographer	1*
Staff Grade Obstetrics and Gynaecology	4
Ward Clerk – Maternity	2

- 2 midwives have been trained and can do a limited range of scans
- 1 midwife just commenced in role can do the full range of scans

This is part of their midwifery role

5. How many Midwives in total are currently employed in Jersey (community midwives and hospital midwives)?

There are currently 52 midwives employed in Jersey, including the Head of Midwifery and Lead Midwife. This is equal to 47. 21 full time equivalents (FTE)

6. How long has the current Head of Midwifery been in her position?

The current Head of Midwifery/Associate Chief Nurse started on 2nd September 2020

7. How many Head Midwife's have been in place since 2015?

There have been three Heads of Midwifery since 2015. The current Head of Midwifery has been in post since 2nd September 2020.

In addition, there was a senior midwife who undertook an act-up position between postholders.

8. How many women were offered a debrief of their birth in 2019 and 2020 and how many women took this up?

In 2019, a total of eighty (80) women (plus some partners/family) accessed support through our Listening Clinic. Fifty-five (55) were seen at the hospital and twenty-five (25) in their home.

In 2020, a total of sixty-four (64) women accessed support through our Maternity Listening Clinic.

9. When was the last time a review (internal or external) was undertaken by HCS regarding maternity services?

The last review of Maternity Services was undertaken by an independent clinician between 1 – 4 September 2020.

Documents to be provided:

1. A governance diagram of maternity services in Jersey

Please see Appendix 1. This is currently under review.

2. Any documentation from any previous internal or external review of maternity services (including results from any previous surveys)

These documents will require consideration for sensitive personal data and third party redaction where there may be third party/patient identifiable information. The response will be provided at the earliest opportunity.

3. Any detailed plans of future renovation/upgrade work to the maternity unit

Phase 1:

- 1A Create a new Bereavement Room and
- 1B New HDU Isolation Room with lobbies, Clean Utility and new Learning and Development Room.

Phase 2:

- Decant Bereavement room to new completed Phase 1A area.
- Completed Phase 1B HDU room to be designated as Hot Birthing Room & Old Obs Theatre to be designated as Hot SCBU area. Hand over SCBU 2 and Edward Rooms to main contractor.
- Create a new SCBU area including new courtyard extension.

Phase 3:

- Decant old SCBU into completed Phase 2 area
- Main Contractor to take possession of old SCBU
- Create 2 new MLU Delivery Rooms with en-suite as well as temporary Nurse Station
- Undertake Service renewal within existing Staff WC & Kitchen in accordance with MEP specification

Phase 4:

- Create new CLU 03 Birthing room with pool within old Obstetrics theatre, new on call doctor's room, Dirty Utility and Blood Gas room.

Phase 5:

- Phase 5 A - Create 2. New CLU Delivery Rooms 01 & 02 with en-suite and new nurse station
- Phase 5B - Turn redundant Delivery Room 02 into New Store 02.

Phase 6:

- Create new Female and Male Staff changing room areas and refurbish existing offices.
- Sub-phases required to ensure staff retain changing areas throughout phase.
- Decant ex Lockers temporarily into completed Store 02 & Staff to use existing Wet Room & 2no Staff WCs on the unit whilst new locker rooms are created.
- Existing Offices are to be decanted temporarily into the Learning & Development Room.
- Undertake service installation works within existing lift lobby and replace existing ceiling.
- On completion of new Lockers - Temp locker room/ Store 02 to be changed permanently into a Store.

Phase 7:

- Refurbish existing Collas 3 ward including new en-suite

Phase 8:

- Refurbish existing Staff Room to create new Collas 7 (private room) with en-suite.

Phase 9:

- Phase 9A Create a new Private Room 04 and refurbish existing Collas Room 3.
- Phase 9B - Refurbish existing Private Rooms Collas 4 & 5.

Phase 10:

- Refurbish existing Collas 2 ward
- Refurbishment of the Breakout space for New Baby Exam Room
- Refurbish Clean Utility Room 03

Phase 11:

- Refurbish existing Collas 1 ward
- Refurbish Medical records store for new Doctor's On Call Room 02

The refurbishment will provide

- The 6 new birthing rooms, 4 new Private rooms and SCBU areas will feature WCs/ ensuites.
- Collas ward 1 & 2 will have 2 new bathroom/ wet room facilities,
- Collas 3 will only have provision for 1 new Wet room.

This was deemed a betterment of the existing condition as fathers had been expected to leave

the unit to access the ground floor facilities.

4. Details of any policies/legislation currently in place that relate to maternity services

There are a range of HCS policies which relate to all services, including maternity. These include, for example, Duty of Candour, the Serious Incident Framework, Patient Safety Learning Event policy, Resuscitation Policy. There are also Government policies that apply throughout all departments, for example HR policies, finance and risk management.

Our clinical guidelines are based on the Royal College of Obstetricians and Gynaecologists and the National Institute of Care Excellence (NICE). These can be provided if requested.

A list of policies will be provided as soon as possible and any policy document can be provided on request.

We are not aware of any Jersey legislation that specifically prescribes or directs the operation of the maternity unit at the hospital over and above that which would affect the Hospital generally, for example, the Data Protection (Jersey) Law 2018 and GDPR; the Health and Safety at Work (Jersey) Law 1989; the Discrimination (Jersey) Law 2016; the Human Rights (Jersey) Law 2000 and so on.

5. Minutes and any associated documents from the current Maternity Voices Partnership meetings and any previous incarnation of this group/similar advisory or consulting group from the last 10 years.

In 2015, we operated a scheme called 'Quality & Women & Children's Services' (QWAC). In 2016, this was termed 'Maternity Liaison' and more recently it has been re-branded as 'Maternity Voices Partnership'.

This is a women and families participation forum which seeks to gather constructive patient feedback and valuable information from their experiences. The service will remunerate patients for their time taken in participating in this group.

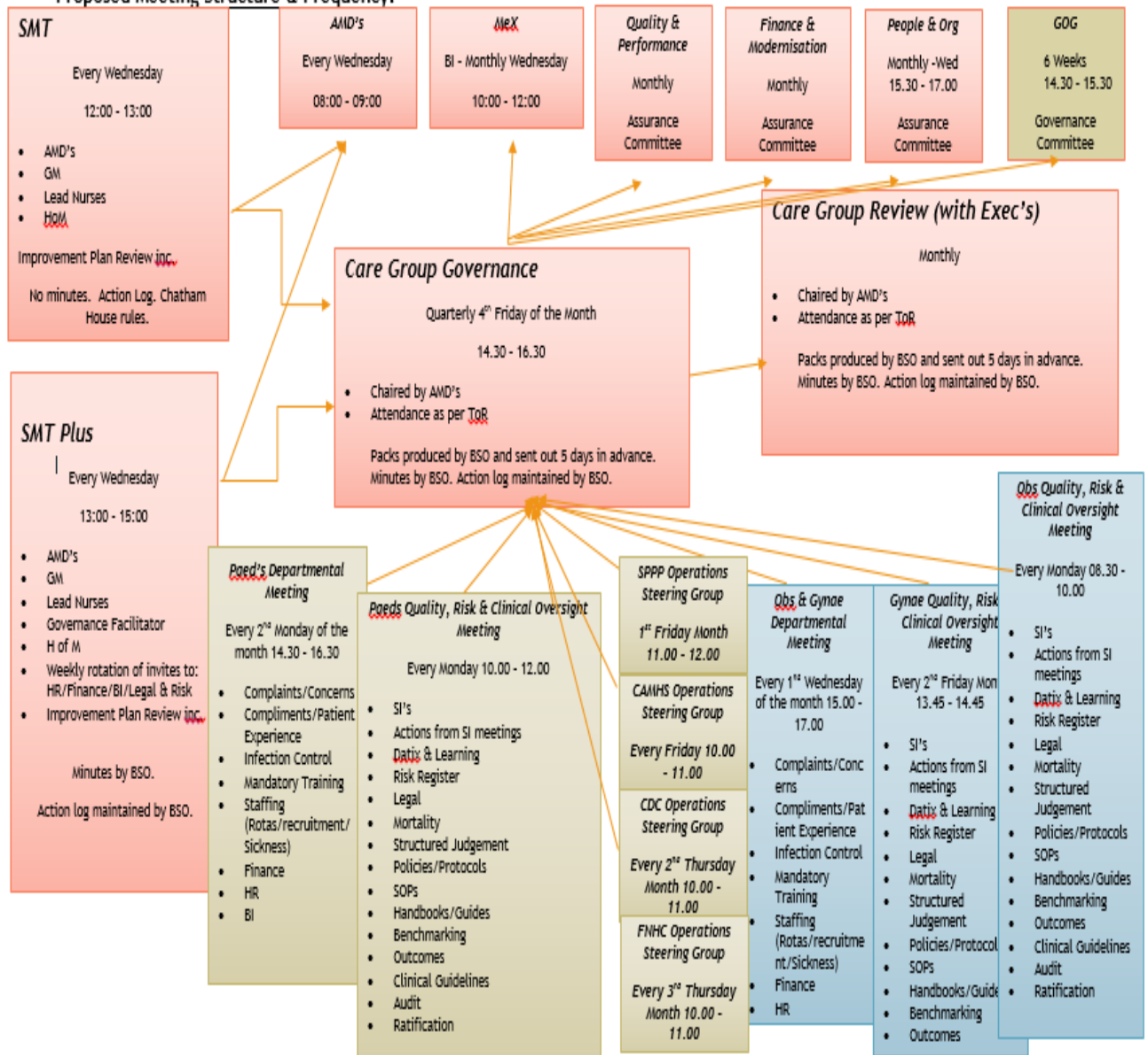
Minutes and associated documents will require consideration for sensitive personal data and third party redaction where there is patient identifiable information. The response will be provided at the earliest opportunity.

Appendix 1 Governance Diagram. Currently under review



Women's, Children's and Family Services Care Group

Proposed Meeting Structure & Frequency:



MATERNITY DATIX RISK ASSESSMENT

