

# Case Study

## Leeds Neonatal and Maternity Services

### Background

Leeds Teaching Hospitals NHS Trust provides an obstetric unit and neonatal unit at both the Leeds General Infirmary (LGI) and St James Hospital site (SJH) site. NHS Leeds CCG together with the NHS England's specialised commissioning team proposed the centralisation of all neonatal provision and obstetric led maternity care on the LGI site, with the development of a new midwifery-led unit on the LGI site. This reconfiguration is as part of the wider development to provide patients with state of the art healthcare which centres around the redevelopment of Leeds General Infirmary including remodelling Leeds Children's Hospital. The plans also included the proposals to consult the public on the options for the model of hospital-based obstetric outpatient care across the 2 hospital sites.

In July 2018 the Senate focused on providing a response to the following questions from Leeds CCG:

- Can the Clinical Senate confirm that the clinical evidence base supports the proposed maternity service reconfiguration and Neonatal Service reconfiguration?
- In addition can the Clinical Senate provide an independent clinical assessment to review the clinical modelling to transform and configure the maternity services within the proposed centralised unit.

### The Problem

Staffing services across 2 sites is a challenge particularly in the neonatal services. The service was struggling to be compliant with the staffing standards across the consultant, middle grade and nursing workforce. The service also did not provide a full choice of birthing options to the population of Leeds as there was no Midwifery Led Unit within the current service. Centralising the service on one site provided a solution to some of those longstanding concerns and challenges of staffing the current split provision and also provided the opportunity to develop an alongside midwifery-led unit and therefore increase choice to the maternity population.

### Our Advice

The Senate confirmed that the proposals to create centralised care for both neonatal care and obstetric services are aligned with national guidance. In both these areas we confirmed that there is a clear clinical evidence base which supports the reconfiguration and were supportive of the proposals.

The Senate recommendations focused on:

- the impact of these proposals on mothers who live near to the SJH site. This population has a high level of deprivation with a high number from the low socioeconomic group, and recommended that the CCG and the NHS England specialised commissioning team develop different approaches to engagement to ensure opportunities were created to discuss and address the challenges of moving this population's obstetric care further from their community.
- further work needed on the clinical modelling to ensure that the workforce model, particularly overnight and weekend cover, was sustainable
- further consideration of the activity modelling to ensure that planned capacity was adequate

### Our Impact

As a result of the Senate's recommendations, the CCG and NHS England specialised commissioning team have worked alongside the Equality and Diversity team from eMBED to ensure that opportunities for engaging with communities around the SJH site are maximised and taken up as part of the consultation process. As part of this assurance, revised consultation plans were taken to a cross-city group of equality and diversity leads, who scrutinised the plans, and provided suggestions for further additions to the plans (including the use of the "Working Voices" network, and improved links with the ongoing Healthwatch projects). These suggestions are now being built into the consultation plans ahead of any future formal consultation. The CCG and the NHS England specialised commissioning team are also working with Leeds Teaching Hospitals NHS Trust and the neonatal Operational Delivery Network to further develop the clinical and activity modelling in the proposals, in line with the ongoing regional review of neonatal services.

### Testimonial

A constructive and critical review from the Senate is essential when developing significant reconfiguration plans. NHS Leeds CCG and NHS England's specialised commissioning team value the external clinical scrutiny provided and are reassured that the reconfiguration reflects the policy and evidence base. Key recommendations from the review are informing the ongoing programme of work.



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