

Trust Headquarters Mytton Oak Road Shrewsbury

> Shropshire SY3 8XQ

Our Ref: SW.djp Tel: 01743 261001

Website: <a href="www.sath.nhs.uk">www.sath.nhs.uk</a> E-mail: simon.wright@sath.nhs.uk

Twitter: @SaTH\_CEO

Date: 5 March 2018

Via E-mail

Gill George c/o Gill@gillgeorge.net

Dear Gill

# Re: Open Letter on Maternity Unit Closures

Thank you for your e-mail of 19 February 2018 and the attached letter. However, there are a number of points raised, which I simply cannot allow to go unchallenged.

You ask what, in terms of our Midwife Led Units (MLUs), the term "not sustainable" means. You then go on to assert that it means The Shrewsbury and Telford Hospital NHS Trust (SaTH) has been "trying to close them down since 1st April 2016, as part of a package of cuts".

### This is simply not true.

Sustainability refers to the fact that we have recognised for some time that, according to our activity figures, women are choosing, or are being assessed clinically as requiring, birth at the consultant-led unit at the Princess Royal Hospital (PRH) in Telford. Overall activity in our rural MLUs is low and continues to fall, from nearly 280 in 2008/09 to around 160 last year: a reduction of nearly 50%.

You claim that SaTH has been trying to close the rural MLUs down since 2016 as part of a "package of cuts".

### This is simply not true.

The current maternity tariff, which is the national system which funds our Maternity Service, is based on activity, with the money following the mum. To suggest that closing the rural MLUs would significantly improve the Trust's financial standing is nonsense. There has been no money removed from our Maternity Services which we actually run at a loss of approximately £2 million-a-year.

You claim that, "between 2015 and 2017, SaTH reduced the number of midwives working at the Consultant-led unit". Between those years, the number of Whole Time Equivalent Midwives grew, year-on-year, from 193 in 2015 to 211 in 2017. We staff the service as a whole, ensuring our women and supported where that support is needed.

### Once again your statement is untrue.

You claim that SaTH deliberately closed rural MLUs to transfer staff to the Consultant-led unit. As I have already mentioned, it is vital that our midwives are where our mums are. Following a suspension of services at our rural MLUs they reopened, as you know, on 1 January 2018. Despite intense media coverage around this, it was nine days before a baby was born at any of our rural units.

During the whole of January, there were <u>just eight babies</u> delivered at these units, compared with <u>376 at our other units</u> (Shrewsbury MLU, Wrekin MLU and the Consultant-led unit at the Princess Royal Hospital in Telford). This clearly demonstrates that our actions were in the best interest of our mums.

You claim that we deliberately recruited newly qualified midwives, suggesting that we did this to save money.

## This suggestion is untrue and lacking any substance whatsoever.

The recruitment campaign that we undertook last year was, in fact, designed to over-recruit to our overall staffing levels in order to address sickness absence, maternity leave and actual vacancies. The recruitment of newly qualified Midwives is something the Trust undertakes every year, separate to the over-recruitment issue, in order to support the development of skills and competencies of those newly qualified Midwives. This national approach known as preceptorship, is used by all maternity services in the UK in order to ensure that newly qualified midwives are supported through their skills development. SaTH does not have higher levels of preceptorship across maternity than any other unit in the NHS.

None of the decisions to suspend services at any of our MLUs has been taken lightly and everything we have done has been in the best interest of **all** mums using our service.

Indeed, when the old building housing Ludlow MLU became structurally unsafe we moved to entire MLU into a new home in just two weeks. The essential building work at Shrewsbury MLU is taking place to ensure this facility is available for the long term costing over £500,000. In fact at every point where we have had to act to safeguard the service we have honoured the opening dates given.

Nothing we are doing in any way affects the wider review of our MLUs which has been carried out by our CCGs. The findings of that review will, in due course, go out to public consultation, when all of our service users will get the chance to discuss them.

In closing, can I confirm that you have made a number of allegations which under scrutiny of evidence are proven to be clearly untrue. Our staff follow the needs of our mums, we continue to focus on their safety and that of their baby. I note you do not mention the significant postnatal and ante-natal services we continue to provide and that dominate the activity in all of our rural MLUs. We continue to be the most dispersed maternity service in the NHS offering the widest possible location and choice to our mums.

I trust that you will now correct your inaccurate statements. We will post both letters on our website along with all of the other maternity information about our services in our continued pursuit of transparency and learning.

Yours sincerely

Simon Wright

Chief Executive