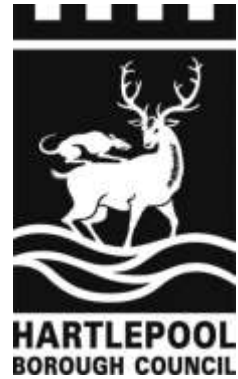


AUDIT AND GOVERNANCE COMMITTEE

AGENDA



Thursday 22 August 2019

at 10.00 am

**in Committee Room B, Civic Centre,
Hartlepool**

MEMBERS: AUDIT AND GOVERNANCE COMMITTEE

Councillors S Akers-Belcher, Black, Hall, Hamilton, Harrison, Loynes and Ward.

Standards Co-opted Members: Ms Clare Wilson.

Parish Council Representatives: Parish Councillor John Littlefair (Hart) and Parish Councillor Alan O'Brien (Greatham).

Local Police Representative: Superintendent Alison Jackson.

- 1. APOLOGIES FOR ABSENCE**
- 2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS**
- 3. MINUTES**
 - 3.1 To confirm the minutes of the meeting held on 15 August 2019 (to follow).
- 4. AUDIT ITEMS**

No items
- 5. STANDARDS ITEMS**

No Items
- 6. STATUTORY SCRUTINY ITEMS**
 - 6.1 The Provision of High Quality Maternity Services and Elective Surgery at the University Hospital of Hartlepool – Action Plan Update (Statutory Scrutiny Manager)



7. **MINUTES FROM THE RECENT MEETING OF THE HEALTH AND WELLBEING BOARD**

No Items

8. **MINUTES FROM THE RECENT MEETING OF THE FINANCE AND POLICY COMMITTEE RELATING TO PUBLIC HEALTH**

No Items

9. **MINUTES FROM RECENT MEETING OF TEES VALLEY HEALTH SCRUTINY JOINT COMMITTEE**

No Items

10. **MINUTES FROM RECENT MEETING OF SAFER HARTLEPOOL PARTNERSHIP**

No Items

11. **REGIONAL HEALTH SCRUTINY UPDATE**

No Items

12. **ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT**

For information: -

Date and time of forthcoming meetings –

Thursday 5 September, 2019 at 10.00 am
Thursday 3 October, 2019 at 10.00 am
Thursday 7 November, 2019 at 10.00 am
Thursday 5 December, 2019 at 10.00 am
Thursday 9 January, 2020 at 10.00 am
Thursday 6 February, 2020 at 10.00 am
Thursday 12 March, 2020 at 10.00 am



AUDIT AND GOVERNANCE COMMITTEE

22nd August 2019



Report of: Statutory Scrutiny Manager

Subject: THE PROVISION OF HIGH QUALITY MATERNITY SERVICES AND ELECTIVE SURGERY AT THE UNIVERSITY HOSPITAL OF HARTLEPOOL – ACTION PLAN UPDATE

1. PURPOSE OF REPORT

- 1.1 To receive progress on the implementation of the Action Plan produced following completion of the Audit and Governance Committee's investigation into 'The Provision of High Quality Maternity Services and Elective Surgery at the University Hospital of Hartlepool'.

2. BACKGROUND

- 2.1 In 2019 Audit and Governance Committee completed its investigation into 'The Provision of High Quality Maternity Services and Elective Surgery at the University Hospital of Hartlepool' and a copy of the resulting report can be accessed via the below link, or by contacting the Statutory Scrutiny Officer (joan.stevens@hartlepool.gov.uk or 01429 284142).

Link to report - [HIGH QUALITY MATERNITY SERVICES AND ELECTIVE SURGERY AT THE UNIVERSITY HOSPITAL OF HARTLEPOOL SITE | Hartlepool Borough Council](#)

- 2.2 The Committee's report sets out a series of recommendations which have been compiled into an Action Plan for completion by all relevant organisations / bodies involved in the investigation. Work has been ongoing on the implementation of the recommendations contained within the Action Plan and an update on progress is to be presented at today's meeting by representatives from the North Tees and Hartlepool Foundation Trust.
- 2.3 A copy of the Action Plan is attached at **Appendix A** for consideration by the Committee.

3. RECOMMENDATIONS

- 3.1 That the Committee considers the updated Action Plan, as provided at **Appendix A**, and seeks clarification on progress where required.

4. **BACKGROUND PAPERS**

The following background paper was used in the preparation of this report:-

Link to report - [HIGH QUALITY MATERNITY SERVICES AND ELECTIVE SURGERY AT THE UNIVERSITY HOSPITAL OF HARTLEPOOL SITE | Hartlepool Borough Council](#)

5. **Contact Officer:-**

Joan Stevens – Statutory Scrutiny Manager
Chief Executive's Department – Legal Services
Hartlepool Borough Council
Tel: 01429 284142
Email: joan.stevens@hartlepool.gov.uk

AUDIT AND GOVERNANCE SCRUTINY ENQUIRY ACTION PLAN**NAME OF COMMITTEE:** Audit and Governance Committee**NAME OF SCRUTINY ENQUIRY:** High Quality Maternity Services and Elective Surgery at the University Hospital of Hartlepool Site

RECOMMENDATION	EXECUTIVE RESPONSE / PROPOSED ACTION ⁺	FINANCIAL / OTHER IMPLICATIONS	LEAD OFFICER	COMPLETION DATE*
Maternity - Service Delivery				
i) That the preferred option for the provision of maternity services in Hartlepool continues to be the re-establishment of a consultant led maternity unit;	This has been previously discussed and remains unfeasible due to safety and quality issues in regard to required Royal College requirements in terms of consultant cover in addition to a requirement for emergency support services i.e. critical care			
ii) That a 'Maternity Hub' be created on the UHH site, with midwife appointments provided from the Hub to secure appropriate levels of staffing on site to enable it to be fully open and operational, replacing its current 'open when required' status.	<p>1. Hub: To establish Hub within the Birthing Centre (BC). To provide a range of antenatal and postnatal care options. Health Visitor (HV) service to be approached to work collaboratively.</p> <p>February 2019: Birthing Centre Hub established and Community midwives providing</p> <ul style="list-style-type: none"> • Pre-booking appointments • Booking Appointments • Antenatal Clinic's • Breast feeding workshop • Parent Education • Postnatal Drop in clinic 	1. No Capacity of the HV service to provide collaborative sessions with Community Midwifery within the Birthing Centre Hub	Head OF Midwifery (HOM) Community Midwife Manager (COM)? Community Midwifery Team (CMM)	1. BC Hub established and functional from February 2019. Service continues to develop

RECOMMENDATION	EXECUTIVE RESPONSE / PROPOSED ACTION ⁺	FINANCIAL / OTHER IMPLICATIONS	LEAD OFFICER	COMPLETION DATE*
	<ul style="list-style-type: none"> • Postnatal weekend clinics • Dietitian Intervention-Planned <p>2. Collaborative working</p> <ul style="list-style-type: none"> • Monthly meetings with HV lead and CMM established. • Services continue to be delivered from remaining Children Centres by both CM and HV. • Collaborative offer by CM to deliver breast feeding workshop and parent education not taken up by HV service • CM service working with HV service to deliver "Pregnancy, Birth and Beyond" <p>3. 12th July 2019: Better Births Continuity of Carer Teenage Team</p> <ul style="list-style-type: none"> • CoC lead, HOM & CMM initiated meeting with HV to jointly work with CoC Teenage Team with the aim to deliver collaborative sessions to this vulnerable group <p>4. Scope Midwifery Models to support the delivery of intrapartum care at Birthing Centre Hub;</p> <ul style="list-style-type: none"> • Network with local and national Service to explore and consider options for delivery of safe sustainable models 	<p>2. No Capacity of HV Service to deliver Collaborative Antenatal education with community midwifery service</p> <p>3. HV Service capacity sited as a concern to collaboratively deliver joint sessions.</p> <p>4. Women's right of choice in choosing their birthing location</p> <p>Sustainability of the service due to women's choice</p>	?CEO	<p>2. Community Midwifery continues to support delivery of care from the Hub and Children's centres. Supporting the HV Team with Pregnancy, birth and beyond. On-going July 2019</p> <p>3. Community Midwifery plan to deliver bespoke sessions for the CoC Teenage Team. On-Going July 2019</p> <p>4. Models scoped July 2019</p>

RECOMMENDATION	EXECUTIVE RESPONSE / PROPOSED ACTION ⁺	FINANCIAL / OTHER IMPLICATIONS	LEAD OFFICER	COMPLETION DATE*
	<p>5. Recruitment</p> <ul style="list-style-type: none"> • Undertake birth-rate + to establish Workforce requirements for the current service delivery • Develop and deliver workforce strategy to recruit to vacant midwifery posts • Undertake Recruitment Drive • Continue to support and develop the maternity preceptorship programme for new graduates. • Support flexi retirement and flexible working patterns 	<p>and women meeting the criteria and given increasing complexity of women's health and national drivers, reducing the eligibility for delivery at a BC</p> <p>5. National Challenge to recruit experienced and graduate midwives. Due to national shortage/ attrition of qualified midwives</p>	HOM Midwifery Mangers	<p>5. Birth Rate + Completed for current service model. July 2019</p> <p>Recruitment undertaken. 7 Graduates expected to commence in October 2019.</p> <p>4 Retirements and 1 flexi retirement supported July 2019</p>
<p>iii) That a review be undertaken of all maternity services and classes provided in Community Hubs, Children's Centres and other venues across the town, with the aim of:</p> <ul style="list-style-type: none"> - Better co-ordinating and 	<p>1. Review service/Parent Education</p> <ul style="list-style-type: none"> • Service review following closure of children centres. • Delivery of services from Birthing Centre Hub • Co-delivery of service with HV • Develop services to support vulnerable groups 	<p>1. Ability of HV Service to support collaborative service delivery</p>		<p>1. Full range of services delivered from Hub and children centres by Community Midwifery service July 2019</p> <p>No co-delivered services at Hub</p>

RECOMMENDATION	EXECUTIVE RESPONSE / PROPOSED ACTION ⁺	FINANCIAL / OTHER IMPLICATIONS	LEAD OFFICER	COMPLETION DATE*
<p>building upon the existing services to meet the holistic needs of Hartlepool mum; and</p> <ul style="list-style-type: none"> - Ensuring that services meet the needs of all sections of the population, including working mums. 	<ul style="list-style-type: none"> • Offer choice • Develop Maternity Voices Partnership (MVP) group 			<p>developed-due to capacity of HV service to commit to delivery.</p> <p>Initial plans being developed from Community Midwives to co-delivery Pregnancy, birth and beyond with HV Service within children centres. July 2019</p> <p>Development of Teenage Team for CoC delivered by community midwifery July 2019</p> <p>Antenatal, postnatal and weekend drop in clinics developed to offer choice. July 2019</p> <p>MVP-Developed and meetings established and held across the service, including the Hub. Listening and acting on Women's feedback to develop the service. July 2019</p>

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iv) That opportunities be explored to co-ordinate the provision of Public Health, and 0-19 Services, to help address the increase in co-morbidities that have seen an increase in the number of 'high risk' mums, and provide every child in Hartlepool with the best start in life; and	1. Public Health/ 0-19 service collaboration <ul style="list-style-type: none"> • Task and Finish Group established chaired by Deputy Director of Nursing UHNT & HP. Members; PH, 0-19 service, CCG, HOM and General Manager Women's and Childrens Services (WAC's). • 1st meeting 1/5/19 • 2nd Meeting 30/5/19 			
v) A Task and Finish Group, of the Audit and Governance Committee, be established to monitor the implementation of the recommendations of the investigation.	Membership agreed – Available to meet when needed.	None	Statutory Scrutiny Manager	Completed
Maternity - Promotion and Marketing				
i) That a marketing plan be put in place to promote the breadth of services available for mums in Hartlepool, leading up to the birth, for the birth and after, with particular emphasis on: <ul style="list-style-type: none"> - Promotion of the Hartlepool Birthing 	1. Marketing: <ul style="list-style-type: none"> • Promote the Local Maternity System (LMS) Choice booklet and App across the service. Communicated through Trust site, MVP social media site and group. • Promotion of the service through MVP group and social media face book page • Develop strategy for marketing of chosen model following scoping 		CMM Community Midwives	1. LMS Choice App launched and marketed and promoted by the Trust. July 2019 MVP group developed and providing feedback to the service for development. July

RECOMMENDATION	EXECUTIVE RESPONSE / PROPOSED ACTION ⁺	FINANCIAL / OTHER IMPLICATIONS	LEAD OFFICER	COMPLETION DATE*
Unit; and - The review of promotional material and websites (including the 'Birthplace Choices' leaflet) to showcase services across the UHH and UHNT equally.	and decision for service delivery			2019
ii) That staff training be reviewed to ensure consistency of professional advice in terms of options for births, including the promotion where appropriate of the Hartlepool Birthing Centre.	1. Training: • To continue to promote choice by providing up-to-date information to support informed choice • Sign posting of women to information to support choice e.g. Nice criteria for delivery at midwifery led units and better births NHS 5-year plan • Undertake one-one birth plan		HOM CMM Community Midwives	1. All midwives promote choice and support women with their choice. Options are discussed at booking and throughout pregnancy. Individual birth plans are developed with women ensuring their choices are supported and listened too.
Maternity - Commissioning				
i) That the Hartlepool and Stockton Clinical Commissioning Group (HaST CCG), as the commissioner of ambulance services, renegotiate their contract	NEAS no longer designates the unit as a place of safety, if an emergency response is required. NHS Pathways, has been updated for a "declared obstetric emergency" to become a Category	None	Mark Cotton - NEAS	Completed

RECOMMENDATION	EXECUTIVE RESPONSE / PROPOSED ACTION ⁺	FINANCIAL / OTHER IMPLICATIONS	LEAD OFFICER	COMPLETION DATE*
with NEAS to remove the designation of the Birthing Centre as a 'place of interest' and provide an assurance that calls for assistance from the Centre would be given the highest possible priority.	1 incident when the call is received from a healthcare professional.			
Elective Care				
Whilst the increase in the take up of elective, inpatient and outpatient services at UHH is encouraging, further work needs to be undertaken to ensure that all patients (from Hartlepool and elsewhere) are fully aware of the options available for treatment at the UHH.	To be updated			

⁺ please detail any risk implications, financial / legal / equality & diversity / staff / asset management considerations

* please note that for monitoring purposes a date is required rather than using phrases such as 'on-going'