

External Stakeholder Brief

Changes to Maternity Services at Milton Keynes University Hospital

More people accessing maternity services in Milton Keynes University Hospital will have their care delivered in traditional community and hospital settings over the coming weeks.

As the hospital continues to recruit more midwives, pressure on current midwifery staff means that there will be fewer midwives working in continuity of carer teams and more working in traditional community and hospital settings. The home birth service will not be affected by this change.

We have needed to make this change to make sure that the maternity services we provide are safely staffed and are able to provide good care to the people using them.

The hospital will maintain three continuity of carer teams – a model designed to provide care by the same midwife or small team of midwives throughout pregnancy, birth and postnatal care.

The decision has been taken following extensive engagement with our midwives and maternity staff, taking into consideration feedback from service users.

People using our maternity services will still be provided with a named midwife. In practice, this change may mean a service user who may have expected to see a midwife from a continuity of carer team in the community and in hospital, seeing a different midwife in the hospital setting than in the community setting, but the level of care they and their family receive will remain unchanged.

Anyone using our maternity services will be informed of any change that may affect how they access their midwifery or multi-professional team directly by their midwife.

This brief outlines the staffing challenges, the engagement we have undertaken and our next steps.

Context and Background

Since early 2021 Milton Keynes University Hospital (MKUH) has been operating both a traditional model of maternity care (a model where a community teams and inpatient teams for antenatal, labour, and postnatal care are available 24-hours-a-day seven-days-a-week) alongside a continuity of carer model (a model where a team care for a person throughout their pregnancy, birth and antenatally).

A very simplistic way of describing this, is that the traditional model requires wards or buildings to be staffed on a 24/7 shift pattern, where a continuity model requires midwives to be available to the individual service user in their caseload as and when they need them 24/7.

MKUH has progressively introduced more continuity teams, in line with the national NHS England expectation that this model should be fully implemented by March 2024.

Currently 51% of people using our maternity services are covered by one of six continuity teams, with 49% of service users receiving a traditional model of community and hospital care.

Current Situation

The most pressing challenge within maternity services at MKUH (which is reflected nationally) is maintaining staffing levels that are safe and that enable individual midwives and the wider multi-professional maternity team to provide good care.

Running both a continuity of carer model and a traditional model means increasing our staff in post to ensure there is adequate numbers of staff available to cover each set of 24/7 services.

Currently recruitment is not keeping pace with staff leaving (for all reasons – from promotion through to retirement) and there are simply not enough midwives available nationally to enable us to recruit more, more quickly.

This, combined with other staffing factors like sickness, maternity leave and other leave, means that the demands on current staff are increasing all the time.

This has meant staff in continuity teams regularly required in the inpatient setting and community setting to support the delivery of care to people not within their case load.

Engaging with staff

In recent weeks we have conducted extensive engagement with our midwives and the teams across maternity to gather their views on what we should do to meet the current staffing challenges whilst still offering people using our services good care and an excellent experience.

The large majority of feedback from staff acknowledged the value of the continuity of carer model when it can be fully staffed, but by the same token there is recognition that with current staffing levels we are unable to deliver all of the benefits of the model.

The steps we have taken

On Monday 11 July, we suspended three of our six continuity of care teams – Avebury, Daisy and Brooklands – and the midwives from those teams are now supporting our traditional models of care.

Over the course of the next few weeks, we shall be using the feedback received through our engagement with staff – along with input from external experts and the Maternity Voices Partnership – to decide how best to proceed with regard to the remaining three CoC teams (Saxon, Silbury and Jasmine). This decision will be a pragmatic one based on feedback received and calculations as to how we can best deploy our teams to support MK women. The options include continuation, a further reduction in the number of teams, or reverting to the traditional model.

What this means for our people using our maternity services

Everyone who uses our maternity services will continue to have a named midwife and will not experience any difference to the level of care provided to them.

If you are currently receiving the care of Avebury, Daisy and Brooklands, you will revert to our traditional model of care. This means you will still receive care from your midwife during your pregnancy and postnatal period, and for your birth, if at home or hospital, you will have care from a community or hospital midwife.

If you have any concerns about your care or what this announcement means for you, please do not hesitate to make contact with your midwife or our community midwifery matron, Natalie: Natalie.Lucas@mkuh.nhs.uk , who can provide you with further information.

Next steps

We will continue to keep our service users, partners and regulators up-to-date about any changes to our maternity services and will provide further information via stakeholder briefs and our Trust website (www.mkuh.nhs.uk) in the coming weeks.