

Best start in life: shaping future maternity and neonatal services

Meeting name: INEL JHOSC

Presenter: Diane Jones, Chief Nursing Officer

Date: 6 November 2024

Introduction

- We want to make sure that all babies born in north east London have the best possible start in life and their parents experience the best possible pregnancy and birth.
- An important part of this is making sure our services are able to support this, and the needs of the growing number of people who live in our area.
- To do this the NHS in north east London are working on a programme, Best Start in Life, to look at maternity and neonatal care (the care of newborn babies) to make sure pregnant women and people, babies and their families receive the best care.

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The programme so far

- The work is being led by clinicians and we are working together across health and care organisations in an open and collaborative way
- We undertook a demand and capacity review, working together to understand:
 - what type of care and support pregnant women and people, and babies need
 - how many people may need the services in the future
 - what the best ways are of delivering care.
- To do this, we:
 - talked to and considered feedback and information from staff and families, community representatives and clinicians
 - reviewed service data
 - looked at areas such as population growth, inequalities and health needs.
- Using this information we created a report, called the Case for Change, explaining what we found.

Case for change summary

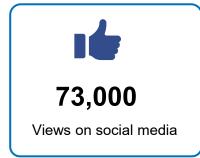
- We looked at how services work now, what we the future needs are expected to be.
- In north east London we have a growing population, more complicated pregnancies and births, more babies needing medical care when they are born, and health inequalities that impact pregnancies, birth and babies.
- This tells us we need to make some changes to maternity and neonatal services and there are
 opportunities to make sure our services are safe, high quality and accessible for all.
- We are not proposing any solutions at this stage and no decisions about services have been made.
- We asked the public for their views on what we have found in the Case for Change.
- We presented to the JOSC on the Case for Change in July, and the information about the case for change is on <u>our website</u>.

How we engaged the public

- We ran public engagement from 16 July 8 September 2024, this included time outside of the school holidays
- The case for change and how to have our say on it was promoted widely to the public, stakeholders
 and staff over this time using a range of communications channels
- We engaged seldom heard groups, representatives of our communities, and families.



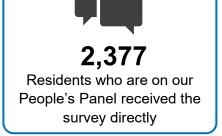














Public feedback on the case for change

We heard from almost 500 people, through a mix of discussions, meetings, presentations, written feedback and survey responses.

- 53% of respondents had had a baby that was cared for in a neonatal unit
- 64% of respondents were residents, others were NHS staff
- 94% of respondents understood why services needed to change
- 94% of respondents also agreed with the need for change





Understand and agree with the need for change

We are currently doing a detailed analysis of the feedback. From what we know so far, below are the areas of the case for change which have come out as key areas of priority based on the response from the public:

Matching demand and capacity across the system

Making sure we have enough of the right care in the right place Delivering neonatal care in the appropriate setting

Delivering care to newborn and ill babies in a place that is best for them

Strengthening antenatal and postnatal care pathways



Improving advice and support before and after pregnancy, and pregnancy loss, ensuring it is clear and accessible.

Addressing variation in quality, access and experience

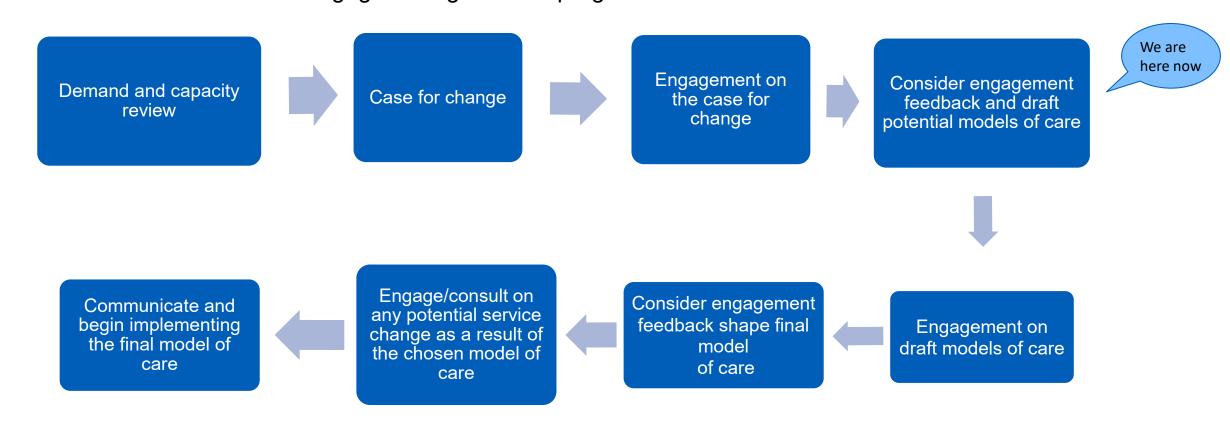
Always showing kindness, respect, compassion and cultural awareness

Next steps

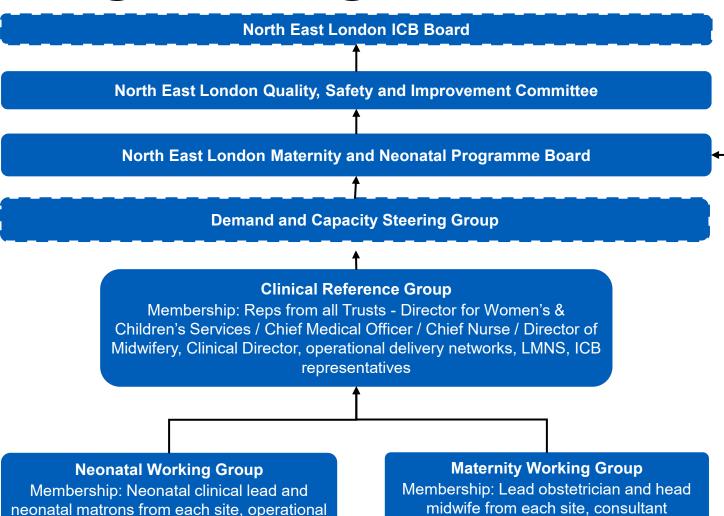
- The feedback, views, ideas and suggestions on our Case for Change are being used to inform potential future care models for maternity and neonatal services.
- They will be based on all this information and insight as well as best practice examples and national guidance including Better Births, Ockenden Report, and the Neonatal Critical care review
- Again this is being done in together with experts, clinicians and community representatives and is underway
- We are anticipating having these potential future models of care in the next few months
- No decisions have been made yet and when we have some options for how future maternity and neonatal care could look in the future we will share these with you and the public for your views so you can continue to help shape them.

Engagement and decision making stages

We are committed to ensuring the feedback from the community and stakeholder engagement feeds into the programme and influences each stage of the future of maternity and neonatal services work. We will continue to inform and engage throughout this programme.



Programme governance



delivery networks, representation and fetal

medicine representatives

midwives, community midwives, Barkantine

and Barking birth centre representatives,

LMNS reps

Decision making forums

Engagement and validation forums

Barts Health strategic and neonatal group

BHRUT maternity assurance board

Homerton maternity and neonatal quality and safety committee

Projecting Maternity Demand from NEL population growth

Based on forecasted demographic growth, we anticipate births to grow by 13% over the next 18 years. Barking & Dagenham is projected to have a 36% growth in births. Based on current treatment sites used by Barking and Dagenham residents, it is expected demand will be predominantly at either Newham or Queen's hospital. It should be noted, Barking Birth Centre currently accommodates only 1% of births from Barking and Dagenham residents, which is typically low risk births.

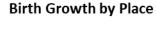
	2023	2028	2033	2038	2041
NEL Births	27,377	28,307	29,204	30,186	30,926
% Growth	-	3%	7%	10%	13%

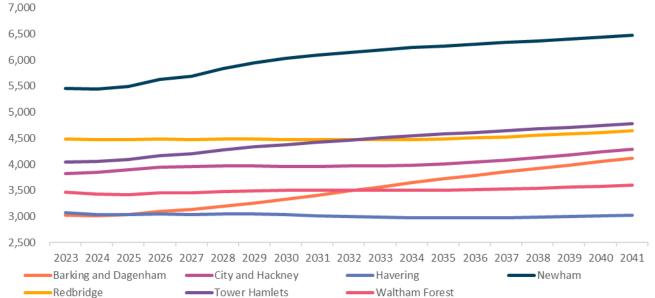


Newham is projected to have circa **4k** births in 2040/41, the highest total births in NEL; a **19%** growth from 2022/23 to 2040/41.

Barking and Dagenham is expected to see a steep increase particularly after **2025**. The fertility rate in 2022/23 (calculated by births for women aged 15 to 44) in B&D is **64.4**, the highest in London . In contrast, the fertility rate in London is **52.9** and a rate of **54.3** for England

Havering is projected to have a **2% reduction** in births in the next 18 years.





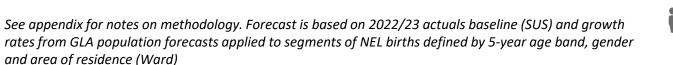


The **two most deprived quintiles** in NEL are expected to grow by **16%**, and the **least deprived** quintiles by **3%**.



Queen's and **Newham** Hospitals are expected to have the highest number of births in 2040/41, circa **6.5k** and **6k** births respectively.

Although Queen's hospital is expected to have the highest number of births in 2041 compared to other NEL sites, it is only forecasted to grow by **3%** from the baseline (2022/23).



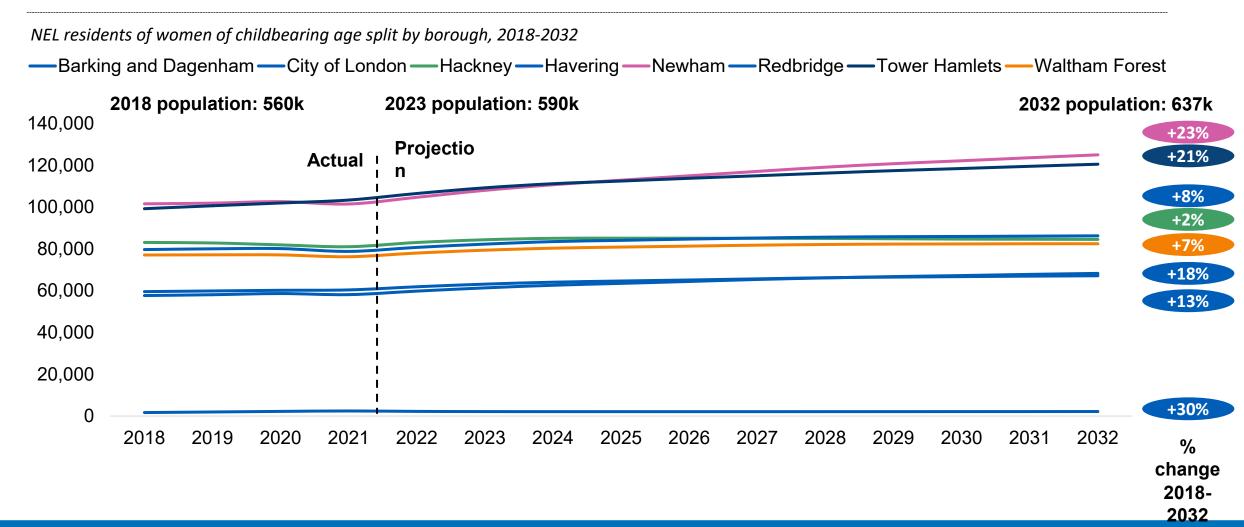


In 2041, the number of births will still be highest in the **Asian** and **White** communities. **Black** ethnicity births will grow by the most at **19%**, and within this, the **African** group will grow by the highest rate **(23%)**.

The **smallest growth** in births is observed at **11%** in the **White** community over the next 18 years.

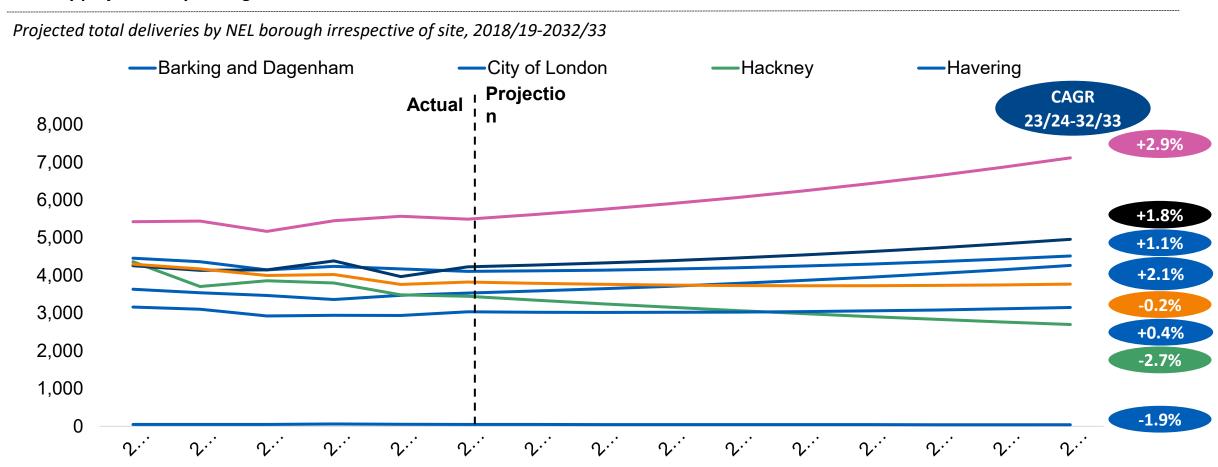
The number of women of childbearing age resident in NEL is projected to increase by 1% each year from 2023/24 to 2032/33, with some variation between boroughs

GLA projected women of childbearing age population in NEL



The total deliveries across NEL boroughs are projected to increase by 10% from 2023/24 – 2032/33, with the largest increases in Barking and Dagenham and Newham

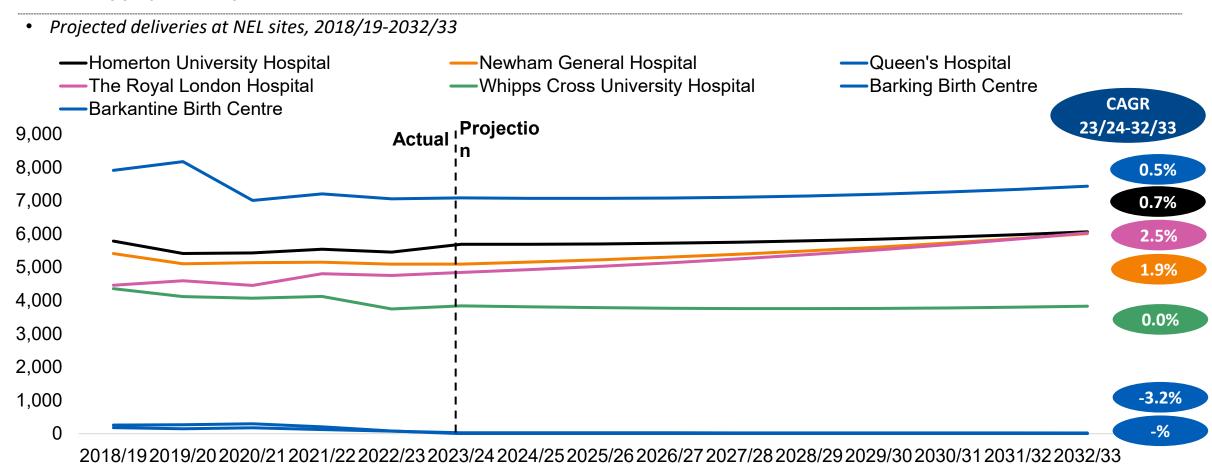
Delivery projections by borough



Note: This includes all deliveries activity at NEL sites, including non-NEL residents

The number of deliveries at The Royal London Hospital and Newham Hospital are projected to increase by 2.5% and 1.9% annually through to 2032/33

Delivery projections by site



Note: This includes all deliveries activity at NEL sites, including non-NEL residents

Between 2018/19 – 2023/24, there has been a decrease in deliveries across NEL with the majority from residents in Newham making up 19.8% of all deliveries in 2023/24

Historic deliveries to residents of NEL

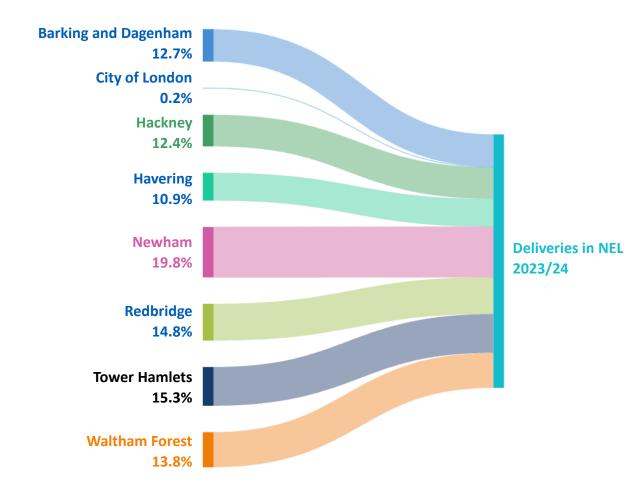
Deliveries in NEL by borough, 2018/19-2023/24

Borough of residence	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Barking and Dagenham	3,633	3,543	3,467	3,362	3,475	3,534
City of London	48	51	50	63	54	50
Hackney	4,364	3,705	3,859	3,798	3,485	3,448
Havering	3,162	3,106	2,926	2,945	2,938	3,035
Newham	5,426	5,443	5,168	5,451	5,568	5,493
Redbridge	4,456	4,365	4,147	4,240	4,175	4,108
Tower Hamlets	4,256	4,135	4,148	4,385	3,969	4,229
Waltham Forest	4,298	4,172	4,001	4,023	3,761	3,825
Total Notes	29.643	28.520	27.766	28.267	27.425	27,722

- Deliveries in NEL boroughs refers to all residents of NEL who had a delivery in that financial year, irrespective of which hospital they attended
- These figures therefore include outflows from NEL to other hospitals outside the ICS

Deliveries to residents of NEL by borough

Deliveries in NEL by borough, 2023/24



The baseline deliveries activity in the model includes inflows into NEL sites as well as NEL residents who receive care elsewhere

Historic deliveries at NEL sites

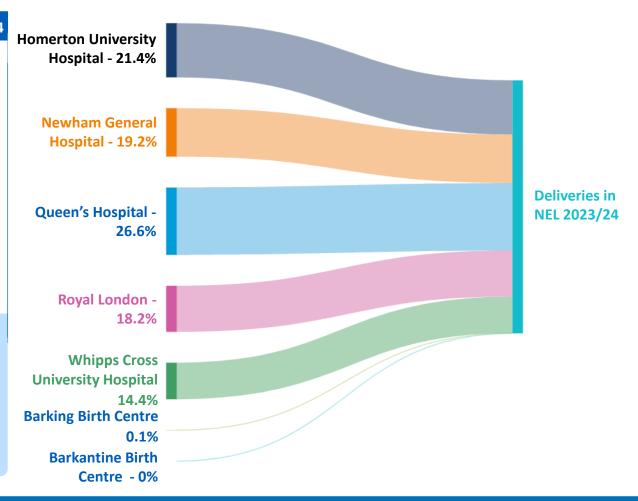
Deliveries in NEL by site, 2018/19-2023/24

Site	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Homerton University Hospital	5,784	5,412	5,432	5,541	5,455	5,688
Newham General Hospital	5,412	5,102	5,138	5,149	5,092	5,093
Queen's Hospital	7,908	8,172	7,006	7,202	7,054	7,081
The Royal London Hospital	4,460	4,591	4,453	4,803	4,750	4,842
Whipps Cross University Hospital	4,356	4,118	4,070	4,124	3,746	3,839
Barking Birth Centre	181	149	178	122	74	28
Barkantine Birth Centre	259	268	297	207	81	0
Total Notes	28.360	27.812	26.574	27.148	26.252	26.571

- Deliveries at NEL sites includes all deliveries at that site in that financial year, irrespective of where the mother is a resident
- These figures will therefore include inflows from those who live outside the ICS but deliver at a NEL hospital

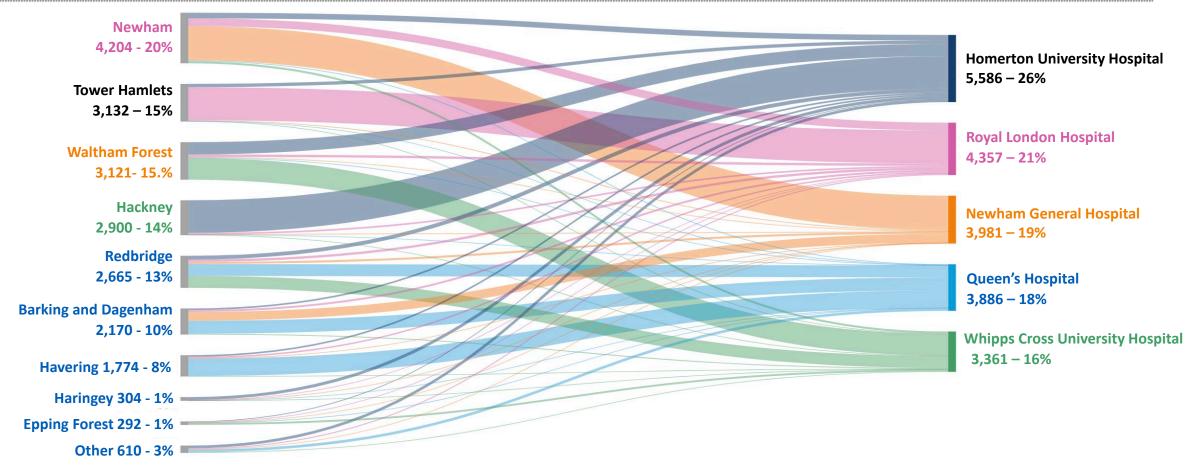
Deliveries to residents of NEL by borough

Deliveries in NEL by borough, 2023/24



Since 2016/17, the majority of neonatal admissions in NEL have been from residents of Newham

Neonatal admissions in NEL by borough and provider (2016/17 – 2023/24)



Note this activity has been aggregated from MSOA level. Where small numbers have been suppressed we have assumed a standard volume of activity. We have also applied an uplift to all activity numbers to account for postcodes which were unable to be mapped to an LSOA.