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24 Cathedral Road / Heol y Gadeirlan
Cardiff / Caerdydd
CF11 9LJ
Tel / Ffôn: 029 20 320502
Fax / Ffacs: 029 20 320600
Email / Epost: wales@wao.gov.uk
www.wao.gov.uk

Mr Jonathan Morgan AM
Chair, Public Accounts Committee
National Assembly for Wales
Cardiff Bay
Cardiff CF99 1NA

Dear Chair

ASSEMBLY GOVERNMENT RESPONSE ON *MATERNITY SERVICES*

The Clerk's letter of 28 April 2010 requested my advice on the response by the Minister for Health and Social Services to the Committee's interim report on *Maternity Services*, which was published in February 2010.

The Committee's report recognised that the former NHS trusts were generally providing appropriate maternity services, but expressed some concern about the number of areas where work was needed to improve services. The Committee flagged its intention to revisit maternity services later this year to consider the progress made by the Assembly Government and the NHS in addressing the areas identified as needing improvement.

The Committee made seven recommendations, all of which have been accepted by the Assembly Government. The first of these recommendations requested an update on how the Assembly Government intended to meet, or had already met, the 12 recommendations in our own report on this topic. Many of our recommendations were directed towards the new Local Health Boards rather than the Assembly Government, although there is still an important role for the Assembly Government in terms of encouraging and monitoring the action taken in response to those recommendations.

The Assembly Government's response provides a very helpful and generally comprehensive explanation of the actions that have been taken, or which are planned, in responding to each of the Committee's and our own recommendations, along with the timescales for action. I have summarised below the key actions being taken to improve maternity services.

Improving the planning of maternity services: WAO recommendations (1a-e) and PAC recommendations 1, 2 and 4.

The Assembly Government reports that it has instigated a National Clinical Project focused on short and longer-term action and strategic planning, with a commitment to produce a Maternity Strategy by December 2010. The Assembly Government reports that the strategy will be supported by a framework for delivery which will include common objectives to deliver both

Direct Line: 02920 320510

E-mail: Gillian.body@wao.gov.uk

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quality and performance. A minimum data set, to collect information about service quality and costs of services, are reported to be implemented from April 2010, although the response recognises that further work will be needed to improve the accuracy of this information and to facilitate the regular benchmarking of the costs of services. The Committee will have an opportunity to assess progress against these plans, when it revisits the subject of maternity services later this year.

Lastly, as requested by the Committee, the response provides a copy of the neonatal framework and the all-Wales neonatal standards.

Ensuring that maternity services have equipment in good order and the right number of adequately trained staff: WAO recommendations (2 a-d; 3a-b) and PAC recommendations 3 and 7.

The Assembly Government has confirmed that an All Wales standardised inventory for birthing equipment has been agreed with Health Boards and that they are working towards full compliance within the next twelve months.

The Assembly Government's response demonstrates that action has been taken to address midwifery shortfalls in most areas and to put measures in place to provide assurance that midwives and maternity support workers are being trained and developed. However, the response with regard to medical staff is less clear both in terms of assurance about maintaining training and in ensuring adequate numbers and presence of consultant staff. The response states that consultant staffing is a key feature of the future Maternity Strategy. Again, the Committee will have an opportunity to follow-up actions taken to ensure appropriate medical staffing levels and training when it revisits this topic later in the year.

Improving maternity services: WAO recommendations (4a-c, 5a-c, 6a-c, 7a-c, 8a-b, 9a-b and 10a-b) and PAC recommendations 5 and 6.

The response notes that work is underway to reassess antenatal care and community provision, to consider how best to meet the needs of women in preparing them for birth and parenthood. When it revisits the topic later in the year, the Committee may wish to follow-up the progress of this work, and whether the NHS has actively engaged with women to understand why women do not attend antenatal classes even when they want to.

The decision on Downs Syndrome testing has still not been made and a submission is currently being prepared for the Minister.

We are aware of very encouraging work with the Caesarean section tool kit, which we understand is proving productive. However, whilst the response states that all Health Boards provide one to one care for women in labour, our survey of new mothers clearly demonstrated that, in practice, this did not always happen. Whilst the situation may have improved, the Committee may wish to follow-up the issue when it revisits the subject to ask about assurance mechanisms, such as Health Boards routinely asking women's views in this particular area.

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The Assembly Government's response points towards a range of actions aimed at addressing lower satisfaction rates during postnatal care, measures being taken to improve support provided for breastfeeding mothers and general support provided to new mothers. As the most critical response from our survey of mothers was about breastfeeding, the Committee may wish to ask how mothers' views in the future would be assessed and acted upon, as well as how good practice will be shared and potentially rolled out across Wales.

Improving maternity service data and analysis and improving safety: WAO recommendations (11a-c and 12a-b)

The Assembly Government's response points towards a range of actions to address and improve maternity service data and analysis. We are aware of very good progress being made with the Maternity Services Information Project but also recognise that the scale of the problem was such that a phased approach to developing and agreeing common data sets is likely to be required. The response also points to the development of improved incident reporting and progress towards improved use and interpretation of electronic foetal monitoring.

Overall, the Minister's response indicates that the Assembly Government is taking seriously the issues raised and the specific recommendations in the Committee's report. But while the proposed actions are encouraging, with signs of some promising early progress, there is clearly much more work to do in a number of areas. However, given that the Committee's report included a clear commitment to revisit this topic later in the calendar year, I do not consider that the Minister's response warrants any further action by the Committee at this stage. The Committee should rightly expect that the Assembly Government will be able to demonstrate further significant progress by that point in time.

Yours sincerely



GILLIAN BODY
Auditor General for Wales