

Birth choices for people living in Wakefield District

Delivering all the options in line with national guidance

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1. We want your views

Since 2017, we have been asking people and partners what they think about maternity, antenatal and postnatal care, and the proposed changes to birthing facilities in Pontefract Hospital.

Pontefract Hospital offers a wide range of care for people during pregnancy (antenatal care) and after the birth (postnatal care), but no births have taken place there since autumn 2019 when it was suspended on grounds of clinical safety. Now, we're consulting you on our proposal not to reinstate the birthing facility at the Midwife-Led Unit (MLU) at Pontefract Hospital and to continue to offer the same antenatal and postnatal care. This proposal has been developed after feedback from the public, staff, clinicians, and partners over the last seven years. We want to make sure we offer the best possible care for people in the Wakefield District - care that meets national standards and works within the resources we have available.

This document explains our proposal in more detail. Please take a few minutes to read through it and let us know what you think. This document includes some technical words. A definition of these words can be found in a glossary at the end of this document. The survey is divided into two main parts – firstly, questions directly linked to the consultation. In the second part, we welcome your views on the services generally.

There is more information about our proposal online. You can also complete the survey online at bit.ly/WakefieldDistrictBirthChoices. If you would like a paper copy of the survey, need it in another format or language, or help to complete it, please get in touch with us at engagement wyicb-wak.engagement@nhs.net or call 01924 213050.

Dokument jest dostępny w innych językach lub formatach np. dużą czcionką lub w formie nagrania. W celu otrzymania, proszę zadzwonić pod 01924 213050 lub wyślij e-mail na adres wyicb-wak.engagement@nhs.net

Potřebujete-li tento dokument v jiném jazyce nebo v jiném formátu, jako je například velký tisk nebo audio, zavolejte nám na čísle 01924 213050 nebo wyicb-wak.engagement@nhs.net

Dacă aveți nevoie de acest document într-o altă limbă sau într-un alt format, cum ar fi tipărire mari sau audio, vă rugăm să ne contactați telefonic 01924 213050 sau <u>wyicb-wak.engagement@nhs.net</u>

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ਜੇਕਰ ਤੁਸੀਂ ਇਹ ਦਸਤਾਵੇਜ਼ ਕਿਸੇ ਹੋਰ ਫਾਰਮੈਟ ਵਿੱਚ ਚਾਹੁੰਦੇ ਹੋ, ਉਦਾਹਰਨ ਲਈ ਵੱਡੇ ਫੌਂਟ ਜਾਂ ਆਡੀਓ ਵਿੱਚ, ਸਾਡੇ ਨਾਲ 01924 213050 'ਤੇ ਸੰਪਰਕ ਕਰੋ ਜਾਂ wyicb-wak.engagement@nhs.net 'ਤੇ ਈਮੇਲ ਕਰੋ।

پر 01924 213050 سے ہم تو ،آڈیو یا فونٹ بڑے جیسے ،ہیں چاہتے میں فارمیٹ مختلف کسی دستاویز یہ آپ اگر wyicb-wak.engagement@nhs.net یا کریں رابطہ

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2. About this consultation

This consultation is being led by NHS West Yorkshire Integrated Care Board (WYICB) in partnership with Mid Yorkshire Teaching NHS Trust (MYTT).

The Integrated Care Board (ICB) is the organisation that is responsible for buying (commissioning) and making decisions about healthcare services in West Yorkshire. This includes many of the services provided by Mid Yorkshire Teaching NHS Trust.

Within NHS West Yorkshire ICB, there are five places, known as 'place-based partnerships', including Wakefield District Health and Care Partnership, who will be delivering this consultation on behalf of the WYICB. The final decision will be made by NHS West Yorkshire ICB through its Wakefield District Health and Care Partnership Committee.

This document aims to:

- Set out the background and reasons for the consultation.
- Explain the proposal and how this has been shaped over time.
- Explain how people and organisations can get involved.
- Outline what will happen after the consultation.

The reason for this consultation

Birthing at Pontefract Hospital was temporarily suspended in 2019 for safety reasons. In January 2024, Wakefield District Health and Care Partnership decided not to reinstate the birthing facility. Shortly after, Wakefield Overview and Scrutiny Committee asked the NHS to hold a public consultation before any final decisions were made.

The last public engagement on the birthing services at Pontefract was in 2019. The partnership wants to understand from current, former, and future patients, staff, stakeholders, local residents and interested organisations their views and experiences on the proposal not to reinstate births at Pontefract Hospital and continue to offer antenatal and postnatal services there.

This consultation provides an opportunity to share any new information that should be considered. We will carefully consider all the feedback we get as part of the consultation before making any final decisions about permanently withdrawing births at Pontefract Hospital.

Where a service change is introduced as an urgent action for safety reasons, there is a requirement to formalise any permanent solution and to comply with the legal duty set out in section 14z45 of the 2006 National Health Service Act (as amended by 2022 Act) to involve the public, 'whether by being consulted or provided with information or in other ways'.

The proposal

This consultation is on the proposal not to reinstate the midwife-led birthing facility at Pontefract Hospital and to maintain the comprehensive range of antenatal and postnatal

care at Pontefract Hospital and in the community. We want to understand the impacts not reinstating the birthing service could have on local people before we make any decisions.

The Mid Yorkshire Teaching NHS Trust provides the full range of birth options to women and birthing people in line with the latest National Institute of Clinical Excellence (NICE) guidelines and the proposal is for this to continue.

It means that people would still be able to choose to give birth at home, in the MLU at Pinderfields Hospital, in the labour ward at Pinderfields, or at the MLU at Dewsbury Hospital. People in Wakefield district can also choose to give birth in maternity units that are nearer to where they live such as in Leeds or Barnsley. The MLU in Pontefract has been suspended to births since November 2019 and no births have taken place there since then.

There are no plans to change the following services, but we still want to know what is important to you about them:

- Locations of antenatal and postnatal clinics.
- Neonatal services across the area.
- Obstetric unit and MLU at Pinderfields Hospital, or the MLU in Dewsbury (Bronte Birth Centre).

3. Introduction and background

Mid Yorkshire Teaching NHS Trust (MYTT) provides services to people living in Wakefield District, North Kirklees and beyond in three hospitals located in Pontefract, Wakefield, and Dewsbury.

Maternity services are provided in a variety of settings across the district, including in the community and at the three hospitals. The service includes midwife-led units, consultant care (obstetrician), triage and other services such as antenatal and postnatal care, obstetric scanning (dating and growth scans), consultant clinics, gestational diabetes services, asthma services, maternal stop smoking services, breast feeding support services and in-patient monitoring.

In midwife-led units, births are supported by midwives rather than obstetricians. They are offered to people who are clinically assessed during pregnancy as being on a low-risk pathway and expected to have a vaginal birth.

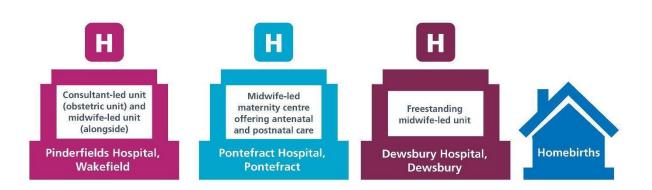
There are two types of midwife-led units (MLUs):

- Alongside MLUs are in the same hospital as an obstetric unit. The MLU at
 Pinderfields is an alongside MLU. Although they run entirely separately to the
 obstetric unit, if there are complications during labour, a transfer to the obstetric
 unit would be made for ongoing care.
- Freestanding MLUs are not next to an obstetric unit; the Dewsbury and Pontefract MLUs are freestanding. If there are any complications during labour

in an MLU, the parent and / or child can be transferred to another hospital for obstetric care.

Our current model of care

The Mid Yorkshire Teaching NHS Trust provides the full range of birth options to women and birthing people in line with the latest National Institute of Clinical Excellence (NICE) guidelines. The Trust is only one of two in the West Yorkshire and Harrogate area to have offered all birth options and was the only one to have offered more than one freestanding midwife-led unit prior to autumn 2019. Nationally, the most common way to organise services is to offer home births, alongside MLU and obstetric unit (46.5% of hospital trusts).



Pinderfields Hospital provides the obstetrician-led care which includes epidurals and Caesarean sections. Complex births are managed at the hospital and the majority of deliveries take place in the obstetric unit. Pinderfields also has a Neonatal Intensive Care Unit and Transitional Care Unit for babies who are unwell. There are also maternity outpatient services including an antenatal day unit. This unit has a triage area for the assessment before delivery. If a pregnancy is thought to be more complex, delivery may be recommended at the obstetric unit.

Pinderfields Hospital also provides a midwife-led unit that operates separately but is located alongside the obstetric unit.

Dewsbury Hospital offers a freestanding midwife-led unit which also provides antenatal and postnatal care.

Homebirths can take place anywhere in the community and are supported by the community midwifery team.

Pontefract Hospital has a midwife-led maternity centre offering antenatal and postnatal care. This unit has been suspended to births since November 2019.

Although the service model changed in 2019 to suspend birthing facilities, the antenatal and postnatal care at Pontefract have continued and been increased to include:

- antenatal and postnatal clinics, including weekends
- obstetric scanning (dating and growth scans)

- · consultant clinics
- gestational diabetes services
- specialist midwife for maternal medicine
- maternal stop smoking services
- antenatal day unit to monitor the health and wellbeing of parents and/or babies which includes fetal monitoring
- · breast feeding support
- parent education
- community family hubs wrapping care around women and birthing people and providing services that are located together and with easy access to further specialised care.

Other hospitals: People in Wakefield district can also choose to give birth in maternity units that are closer to where they live, like Leeds or Barnsley.

4. The reasons we need to make changes

When the Midwife-Led Unit (MLU) at Pontefract Hospital opened in September 2016, it was expected to handle around 500 births a year. Initially, there were 350 births annually, and this number steadily declined, averaging just 160 births per year in the last three years the unit was open. Despite work to encourage people to choose the MLU as a birthing option, more people from Pontefract chose to give birth at Pinderfields Hospital.

Birth numbers have been on a downward trend nationally and we are also seeing this locally. The complexity of those giving birth has dramatically increased with more people requiring additional care and input from multiple specialist roles.

Staffing challenges

For several years, staffing shortages meant midwives working in Pontefract were often reassigned to Pinderfields, where most births in the district take place. This left Pontefract's MLU sometimes being unable to accept births at short notice. In autumn 2019, due to clinical safety concerns, births at Pontefract were temporarily suspended, allowing staff to support the labour ward and midwife-led unit at Pinderfields Hospital.

Reopening and closing the unit based on staffing levels is not a sustainable solution. It disrupts people's birth plans and creates uncertainty for both families and staff. Although staffing has improved since 2019 across the trust, the low number of people who chose Pontefract for births and the small group who meet the clinical criteria for safe delivery at the MLU, mean it is not an efficient use of resources to reinstate birthing services at Pontefract. The feedback we received previously also showed that being transferred was a concern for many. Some opted for hospital birth just in case assistance was needed.

Ongoing and expanded services

Pontefract Hospital continues to provide vital maternity services, including antenatal and postnatal clinics, as well as consultant obstetrician clinics. The antenatal day unit is open

weekdays 9am to 5pm, with additional antenatal and postnatal weekend clinics. Services such as smoking cessation support, diabetes and asthma management, breastfeeding support, and parent education classes have been added. Pontefract is also used for midwifery staff training. The site has grown into a Community Hub, linked to the development of Family Hubs as part of Wakefield's Start for Life offer.

Full choice of birth settings

National guidelines from the National Institute for Health and Care Excellence (NICE) recommend offering a range of birth options, including home births, midwife-led units (freestanding and alongside), and obstetric units. Although births are no longer available at Pontefract, people living in Wakefield District still have access to the full choice of places to give birth.

Trends and future planning

Birth rates have declined nationally over the past decade, and this trend is reflected locally, however the complexity of care needed for some people has increased. Although midwife-led births have increased across the Mid Yorkshire Teaching NHS Trust since 2016, activity at Pontefract's MLU dropped to around two to three births a week, even when fully staffed. To use resources effectively, we need a model that meets current and future needs as well as keeping equitable choice across the district.

Since 2017 there has been extensive public and staff engagement, including discussions with the Yorkshire and Humber Clinical Senate, local clinicians, and NHS England with the intention of progressing to formal consultation on a revised service model. Based on the feedback we had at the time, it was proposed for the model not to include provision of intrapartum care (care during active labour/births at Pontefract Hospital).

Learning from national reviews

Since the temporary suspension of births at Pontefract, national priorities for maternity care have evolved. Reports like the Better Births Review (NHS England. 2016), Ockenden Report (DHSC. Final Report March 2022), and East Kent Report (DHSC October 2022), have highlighted the importance of safety and quality in maternity services. The NHS Long Term Plan and the Three-Year Delivery Plan for Maternity and Neonatal Services emphasise increasing safety and improving the quality of care throughout pregnancy and the postnatal period.

Improved service quality

Thanks to better recruitment, retention and staff deployment, the Care Quality Commission (CQC) has rated maternity services at Mid Yorkshire Teaching NHS Trust more highly since births at Pontefract were suspended. These improvements demonstrate how focusing resources can enhance the quality of care.

This consultation marks the final step in providing clarity about the future of birthing services at Pontefract and the continuation of the current services on offer - midwifery care before and after birth, antenatal consultant-led care and ultrasound services. We are

committed to ensuring safe, high-quality maternity care for people during pregnancy and after the birth while offering a range of birth options across the district.

5. Background to the proposal

In summer 2018, Mid Yorkshire Teaching NHS Trust raised concerns about the future of the Midwife-Led Unit (MLU) at Pontefract Hospital with what was then NHS Wakefield Clinical Commissioning Group. The main concern was low usage - there were two to three births a week when it was open. Nationally and locally, birth numbers have been reducing but the complexity of births now using our services has increased, meaning that more need additional care. Birth choices depend on both personal preference and clinical safety, with some pregnancies requiring a more closely monitored environment than a freestanding MLU can provide.

At that time, the MLU service model required two members of staff on-site 24/7. However, staffing challenges led to temporary closures, as midwives were reassigned to busier sites, like Pinderfields. The Trust handle about 5,500 births annually, which is about 500 births a year lower than before births at the MLU were suspended. The most significant closure occurred from September to November 2018, lasting six weeks. In its final year of operation, the MLU at Pontefract had only 146 births.

Gathering feedback

To address these concerns, the Clinical Commissioning Group (CCG) began a formal NHS England Service Change Assurance Process in autumn 2018. As part of this process, a public engagement exercise was held from 1 February to 17 March 2019.

The NHS has been listening closely to what local people have to say about maternity services. This feedback, along with input from stakeholders, has helped shape the current proposal. You can read more about what we have heard so far at bit.ly/WakefieldDistrictBirthChoices.

To ensure the proposal meets NHS standards for service changes, we have followed a robust process. This includes demonstrating:

- strong public and patient engagement: We have involved local communities and listened to their views.
- support for patient choice: The proposal aligns with current and future needs, ensuring people have a range of safe birth options.
- clear clinical evidence: The decision is based on robust clinical data and prioritises safety and quality of care.
- commissioner support: The organisations responsible for planning and funding healthcare services support this proposal.

This proposal aims to provide high quality maternity care that meets the needs of our community while using resources effectively.

What people have told us already - people who have used services, their families, staff, and other stakeholders

Since 2017 we have been talking to people about maternity services in Wakefield District. In 2019, we carried out a more focused review of the Midwife-Led Unit (MLU) at Pontefract Hospital. As part of this work, we involved our public assurance group and the local Overview and Scrutiny Committee. Their feedback helped shape how we planned and carried out our engagement. You can read more detail about the engagement feedback on our bit.ly/WakefieldDistrictBirthChoices.

We have carefully reviewed the feedback gathered over the years and you can find more about this here bit.ly/WakefieldDistrictBirthChoices.

Here are the key priorities people want decision-makers to focus on:

- enough high-quality staffing in hospitals and the community
- access to safe and high-quality care close to home
- choice about where to give birth

In September 2019, we held a public deliberative event. During the session, the hospital trust shared the reasons for temporary suspension of births at Pontefract Hospital leading to the need to review the position, engagement influencing the direction of travel, and further work with independent clinicians.

Participants discussed previous feedback from patients, staff, and clinicians, which had already begun shaping the future of local maternity services.

This ongoing conversation has been essential in helping us understand what matters most to our community. You can read more about this feedback and its influence on our proposals on our website at bit.ly/WakefieldDistrictBirthChoices.

More recent patient and public engagement

During the COVID-19 pandemic, numerous restrictions were put in place to keep patients and staff safe. To understand how these changes affected people using maternity services at Mid Yorkshire Teaching NHS Trust (MYTT) and Calderdale and Huddersfield NHS Foundation Trust (CHFT), a survey was carried out in July 2020. This gave us valuable insights into your experiences during this challenging time.

Other feedback we have used to support this consultation includes:

- the Maternity and Neonatal Voices Partnership's engagement
- feedback gathered by the Quality Intelligence Group
- the observations and feedback gathered during our Patient Safety Walkabout to the maternity services at Pontefract Hospital

What clinicians told us

As part of our work, we listened to what staff in maternity services and other clinicians thought about the proposal. We have asked them in several ways.

We held a workshop in 2019 to think about the service design and if there were other ways to deliver services that met people's needs and met national standards.

The Yorkshire and Humber Clinical Senate did an independent clinical review of our proposal in 2019. The Senate provides impartial advice where there are plans that could mean a change to a service. They felt that the MLU at Pontefract Hospital was not sustainable and that all birth choices were still available in Wakefield District.

Having the right staff

Across the country, fewer babies are being born. At the same time, some pregnancies are becoming more complex. Factors like age, obesity and long-term conditions like diabetes are contributing to this.

The population of Wakefield District is growing, with the population of women and girls aged 15-44 expected to grow by more than 10% between 2022 and 2042. We want to make sure our maternity services work well now and in the future.

Staff in maternity services play an important role in improving health and wellbeing in the long term. They help people to reduce smoking and alcohol use in pregnancy, encourage breast feeding and support healthy pregnancies.

There is a shortage of midwives nationally. Locally, midwife shortages affected the number of sites that could be available, leading to temporary closures for safety reasons. MYTT has worked hard to make sure we have the right staff in place with minimal vacancies. Focus remains on maintaining a strong, well-staffed maternity team to continue providing safe, high-quality care.

Getting it right for our communities

We're committed to making sure our services work for everyone in Wakefield District. To do this, we use a tool called an **impact assessment**. This records who lives in Wakefield District, who uses our services and what we need to think about to make sure services meet community needs, such as interpreting. Wakefield District is home to people from a wide range of different backgrounds, ethnicities, ages, health conditions and cultures. We want to hear from all groups about our plans because we know that people don't all have the same access to our services or the same experiences when they are using them.

To make sure we know that we have heard from all the different communities, we ask people to tell us about themselves when they fill in the survey, using our equality monitoring form. We use this information to check if we have missed hearing from any groups so we can reach out to them directly.

When we review what people have told us in a survey, we look for any differences in how groups feel about our plans. We use the information and community views from the survey to build our Equality Impact Assessment. The impact assessment records:

- what we know about maternity services
- what people think about our plans
- what steps we can take to address any concerns

This assessment helps us decide what we do.

We use a Quality Impact Assessment to make sure our services are safe, effective, and high quality. This assessment also tells us what good practice looks like, using national standards, good practice, and guidance.

Our impact assessments can be found on our website at bit.ly/WakefieldDistrictBirthChoices.

How the proposal fits with local and national plans an a

Wakefield District Health and Care Partnership has three key priorities for local organisations working together:

1. Equal Health for All

We want everyone to have the same chance of good health. We will work to reduce the health inequalities experienced by people in our most deprived neighbourhoods and vulnerable groups, such as people with learning disabilities.

2. Building Community Support

We will develop a network of Integrated Neighbourhood Teams and Family Hubs across the whole district to provide joined-up care and support.

3. Managing Service Demand

We will manage the growing demand into services across the Partnership through innovative approaches to care, proactive planning, and continuous improvement.

We work together to deliver our <u>Health and Wellbeing Strategy</u>. We will prioritise the things that make the biggest difference to local people's health:

- everyone having a healthy standard of living
- giving every child the best start in life
- preventing ill-health
- creating and developing sustainable communities

National strategies, reports and plans play a vital role in shaping maternity services. We have included these on our website at bit.ly/WakefieldDistrictBirthChoices.

National and local information shows that we have the chance to improve the outcomes and experiences of parents and babies. To do this, we must prioritise safety, quality and needs of the people using our services. To deliver the best care, we need the right staff and services in the right places to make sure we provide quality and safe services that meet national standards.

Consolidating births has been a key part of this effort. It has helped the maternity service work towards achieving the nationally required transformation and standards, improving quality and safety while meeting the needs of our communities.

6. Summary

We want to give those who are due to give birth in our area, including Pontefract, their ongoing care as close to home as possible. We also need to make sure that we use our resources as best as we can and deliver consistent and sustainable services so that those who use them have a good experience. We are committed to the further development of our services at Pontefract Hospital, which offers excellent facilities. Since September 2019, we have invested a total £22.6m in developing the services and facilities we offer from the hospital for our local community.

The maternity services in our area experienced real challenges before the COVID-19 pandemic. It is our view that not reinstating a birthing service at Pontefract Hospital is the best way to make sure that those challenges are not repeated. We want to provide clarity to local people about birthing options in our area. Not reinstating the birthing facility in Pontefract Hospital would ensure that maternity resources are used as efficiently as possible and that all birthing people have the right to a positive birth experience, to compassionate care from knowledgeable, skilled staff who recognise that each person, family, and newborn are unique.

Continuing to deliver antenatal and postnatal care in Pontefract would make sure that we continue to provide what the public and staff have told us is important to them, closer to where people live.

7. How we will use the findings

All the feedback about the consultation will be independently analysed and evaluated by an external organisation. They will also review the feedback halfway through the consultation so that we know if there are any communities or areas that are not being reached. If the review shows gaps, we will make sure that we act on the findings.

A final report of the findings will be received by the Integrated Care Board at Wakefield District and the Mid Yorkshire Teaching NHS Trust. The findings will be considered and taken into account by NHS West Yorkshire ICB through its Wakefield District Health and Care Partnership Committee, in any decisions they make. All decisions will be made public.

8. Have your say

This consultation will run until 18 May 2025. We want to hear your thoughts about maternity services locally. There are different ways you can give your views:

- Complete a survey online at bit.ly/WakefieldDistrictBirthChoices
- Fill and return the survey in this booklet (no stamp needed) to FREEPOST NHS WAKEFIELD
- Email us your views at <u>wyicb-wak.engagement@nhs.net</u>
- Phone us on 01924 213050
- Join our online events
- A series of drop-in sessions will also be held throughout the consultation. For more information on all events, please visit our website at bit.ly/WakefieldDistrictBirthChoices.

There is more information about our proposal online. You can complete the survey online at bit.ly/WakefieldDistrictBirthChoices. If you would like a paper copy of the survey, need it in another format or language, or need help to complete it, please get in touch with us at wyicb-wak.engagement@nhs.net or call 01924 213050.

Consultation survey

Have you read the consultation document?

Please read the consultation document or go online for information about our proposal. This survey gives you the opportunity to share your views. It is divided into two main parts – firstly questions directly linked to the consultation. In the second part, we welcome your views on the services generally.

It can be completed by those who are or who have used our services as well as the public and our colleagues. There is more information online at bit.ly/WakefieldDistrictBirthChoices which you might want to read. All surveys are anonymous, no answers will be linked to you.

Please share your views by 18 May 2025. If you would like help completing the survey or to receive it in a different format (like paper, audio or a different language) please telephone 01924 213050 or email wyicb-wak.engagement@nhs.net

☐ Yes, all of it
☐ Yes, most of it
☐ Yes, some of it
☐ No, I haven't read it
You can find more information about the consultation on our website:
bit.ly/WakefieldDistrictBirthChoices
About you:
About you.
1. I am answering this survey as (Please select one):
☐ A current user of maternity services
☐ A past user of maternity services
☐ A family member of a current/past user of maternity services
☐ A member of the public
☐ A third sector/voluntary/charity worker
☐ A member of staff working in maternity services at Mid Yorkshire Teaching NHS Trust
☐ A colleague working in health or social care
□ Other: Please state
2. What is your experience of local maternity services? (Please select one)
□ I (or a family member) am currently using maternity services
☐ I (or a family member) have used maternity services in the last 2 years
☐ I (or a family member) have used maternity services in the last 2-5 years
☐ I (or a family member) have used maternity services longer than 5 years ago
☐ I (or a family member) have not used maternity services but plan to in the future
☐ I (or a family member) have not used maternity services and don't plan to

Part one

Choosing where to give birth - understanding the impacts as part of this consultation

3. Did you know that you could choose where to give birth? (Please select one) ☐ Yes
□ No
☐ Not sure (go to question 5)
4. What type of birth did you (or your family member) choose / would you choose? (Please select one
□ A consultant-led labour ward
☐ A midwife-led birthing unit alongside a consultant-led labour ward
☐ A freestanding midwife-led unit
□ A home birth
□ Not sure / don't know
□ Not applicable
5. Where are you (or your family member) booked to give birth / most recently gave birth / would like t give birth? (Please select one)?
☐ Pinderfields Hospital (Labour Unit / consultant-led care)
☐ Pinderfields Midwife-Led Unit (Birth Centre)
☐ Pinderfields Hospital (elective c-section)
☐ Dewsbury Midwife-Led Unit (Bronte Birth Centre)
☐ Home birth
□ Other (please state)
6. What are / were the main reasons for choosing this location? (Please select all that apply)
☐ Used it before
□ Closer to home
☐ Easier to travel to
☐ Family / friend recommended
☐ Recommendation from midwife
☐ The type of birth I (or a family member) wanted
☐ No choice - I (or a family member) had to give birth here
☐ Want(ed) access to Doctors in case they were needed
☐ Want(ed) access to an epidural if needed
☐ Felt safer for me (or your family member) and the baby
☐ I (or a family member) don't/didn't want to be transferred to another hospital if needed more care or pain relief during labour
☐ My own or other's positive experience
☐ Online research
☐ I haven't made my choice yet
□ Not sure □ Other (please state)

7. Did you (or a family member) have a baby at Pontefract Hospital? (Please select one only) ☐ Yes
□ No (go to question 9)
□□ Not applicable (go to question 9)
8. After giving birth at Pontefract Hospital, have you (they) given birth in other hospitals / Midwife-Led Units? (Please select one only) ☐ Yes ☐ No
☐ Not applicable
 9. What impact will not being able to give birth at Pontefract Hospital have on you or your family? (Please select one only) No impact at all Some impact
☐ Big impact
□ Not sure
□ Not applicable
Please tell us about the kind of impacts - positive or negative - this could have on you or your family?
We are asking people their views to understand if there is anything else we need to think about before making our final decision. We are open to other suggestions.
10. Please tell us if there is anything else you think we should consider

Part two

Experience of services

Thank you for answering our consultation questions. We want to hear your views on local maternity services.

11. What facilities did you use / would you like during labour? (please select all that apply)
☐ Birthing pool
□ Bath
☐ Different types of pain relief
☐ Being able to move around
☐ Able to have my family around me
☐ Access to music
☐ The lighting that is available
☐ Hypnobirthing
☐ Facilities for my partner
□ Other (please state)

12. How happy were you with these things during your maternity care

How happy were you?	Very happy	Нарру	Neither happy nor not happy	Not happy	Not happy at all	Not applicable
Information about what to expect when giving birth at chosen location						
Information about where to give birth and your choices						
Information about pain relief options						
Continuity of care (seeing the same midwife or midwives before and after giving birth)						
Cleanliness						

How happy were you?	Very happy	Нарру	Neither happy nor not happy	Not happy	Not happy at all	Not applicable
Antenatal appointments						
Labour / birthing						
Postnatal appointments / checks						

13. Thinking about your maternity care, what was good?	
14. Thinking about your maternity care, what could have been better?	

- 15. Which of these antenatal/postnatal services would you expect to have at your local clinic or hospital?
- Scans
- Blood tests
- Routine pregnancy monitoring (e.g. blood sugars, baby movement)
- Postnatal checks (checks that are done for baby like a hearing test and physical check)
- Postnatal checks for birthing parent (done about six weeks after giving birth to check recovery)
- Feeding support
- Child health advice
- Parental education
- Support to stop smoking
- Support or advice to be healthy in pregnancy
- Advice on contraception postnatally
- Signposting to emotional and mental health services
- Other (please tell us).......

Part three

Equality Monitoring Form

It is important to us that all communities across Wakefield have their say in shaping local services.

Equality monitoring collects data about people, it is important for us to collect and analyse this data to make sure we provide the right services. This information helps us understand which communities' views are being heard and which are not.

Your information will be protected and stored securely in line with data protection rules and no personal information will be shared. If you would like to know how we use this information, please visit our <u>privacy notice</u>.

Please answer the questions below, some questions may feel personal, you do not have to answer them.

Who is this form about? (Please tick one option)				
□Me				
□Someone else - using their information				
What is the first part of your postcode?				
Example WF1, WF8:				
□ Prefer not to say				
What is your gender? (Please tick one option)				
□ Man				
□ Woman				
□ Non-Binary				
□ Prefer not to say				
☐ I describe my gender in another way.				
(Please tell us):				

Но	w old are you?					
Ex	ample 42:					
	Prefer not to say					
Wh	nat country were you born in? (Please tick one option)					
	□United Kingdom					
□F	Prefer not to say					
	Other country: (Please tell us):					
Wr	nat is your religion? (Please tick one option)					
	No religion					
	Christian (including Church of England, Catholic, Protestant and all other denominations)					
	Muslim					
	Buddhist					
	Hindu					
	Jewish					
	Sikh					
	Prefer not to say					
	Other religion (please tell us):					

What is your ethnic group?
(Please tick one option)
□Prefer not to say
Asian or Asian British
□ Pakistani
□ Bangladeshi
□ Indian
□ Chinese
□Any other Asian background (Please tell us):
Black, Black British, Caribbean, or African: Caribbean African
□Any other Black background: (Please tell us):
Mixed or multiple ethnic groups
□ White and Black Caribbean
□ White and Black African
□ White and Asian
□Other Mixed background (please tell us):
White
□ English, Welsh, Scottish, Northern Irish or British□ Irish
☐ Gypsy or Irish Traveller
□ Roma
□Other White background (please tell us):
_ care cacagreana (preace cent as).
Other ethnic groups
□ Arab
□Any other ethnic background (please tell us)

AIG	e you disabled? (Please tick one option)
	Yes
	No
	Prefer not to say
Do	you have any long-term conditions, impairments, or illness?
(Pl	ease tick all that apply or go to next question if not relevant)
	Prefer not to say
	Physical or mobility impairment: (such as using a wheelchair, difficulty walking or using your hands)
	Hearing impairment: (such as being D/deaf or hard of hearing)
	Sight impairment: (such as being blind or partially sighted)
	Mental health condition: (such as having depression, schizophrenia, bipolar disorder)
	Learning, understanding, concentrating or memory: (such as Down's Syndrome, stroke, or
	head injury)
	Neurodivergent conditions: (such as autism, ADHD and / or dyslexia)
	Long term conditions: (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy)
	Other: (please write in):
Are	e you a carer? (Do you provide unpaid care or support to someone who is older, disabled or
	has a long-term condition) (Please tick one option)
	Yes
	No
	Prefer not to say

What is your sexual orientation? (Please tick one option)			
	Bi or Pansexual		
	Gay		
	Lesbian		
	Heterosexual / Straight		
	Asexual		
	Prefer not to say		
	I prefer to use another term (please tell us):		
Are	e you Trans? (Please tick one option)		
(Trans is a term used to describe people whose gender identity is not the same as the sex registered at birth)			
	Yes		
	No		
	Prefer not to say		
The cost of living can impact experiences of health and outcomes can you tell us			
	about your current financial situation?		
	(Please tick one option)		
	Very comfortable (I have more than enough money for food and bills and a lot left over)		
	Quite comfortable (I have enough money for food and bills, and some left over)		
	Just getting by (I have just enough money for food and bills and a nothing left over)		
	Really struggling (I don't have enough money for food and bills and sometimes run out of money)		
	I don't know		
	Prefer not to say		
(We ask this question to help us understand the impact of income on experiences of services or health)			
Are you pregnant or have you given birth in the last 6 months? (Please tick one			
	option)		
	Yes		
NH	NHS West Yorkshire Integrated Care Board and Mid Yorkshire Teaching NHS Trust		

	No Prefer not to say	
Are you a parent / primary carer of a child or children, if yes, how old are they?		
(Please tick any that apply)		
	No	
	0 to 4	
	5 to 9	
	10 to14	
	15 to19	
	Prefer not to say	
Ar	e you care experienced? (Please tick one option)	
Anyone who as a child is living, or has lived, in care at any stage in their life. Including		
living in residential care, foster care, kinship care, or at home with a supervision order.		
	Yes	
	No	
	Prefer not to say	
Thank you for taking the time to complete this form.		

Please return this form to: FREEPOST NHS WAKEFIELD (you don't need a stamp)

Glossary of Terms

Alongside midwife-led unit - unit where births are supported by midwives rather than obstetricians. Alongside means that it is in the same hospital as an obstetric unit

Antenatal - care for parent and baby during pregnancy

Clinical criteria for MLU – guidelines which are used to see if a person is likely to be able to birth at MLU. This includes their age, BMI, absence of significant medical conditions and pregnancy complications including high blood pressure.

Equality Impact Assessment – an assessment that helps us to understand possible impacts on our communities.

Freestanding midwife-led unit – unit where births are supported by midwives; it is not next to an obstetric unit but is in a separate place.

Integrated Care Board - the organisation responsible for allocating the NHS budget in a geographical area and commissioning services.

Maternity and Neonatal Voices Partnership (MNVP) - independent organisations which gather feedback on maternity and neonatal care experiences, working with the NHS to make changes.

Midwife-Led Unit – unit where births are supported by midwives rather than obstetricians.

Labour ward – ward in a hospital where births can take place. It offers care for those who are more likely to have complications during labour and birth or when pain relief like epidural is wanted.

NHS England Service Change Assurance Process – a formal process that is followed when there is a significant change in service.

Postnatal - care for the baby after birth.

Obstetrician - a doctor who specialises in the care during pregnancy and childbirth.

Triage – assessment area to check any urgent issues.

Quality Impact Assessment - an assessment that helps us to make sure our services are safe, effective, and high quality