

Clinical : Women's Health - Maternity
Proactive Release: 24 July 2019



15 July 2019

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Dear [REDACTED]

Official Information Act (1982) Request

I write in response to your Official Information Act request, dated 20 June 2019, which we received on transfer from the Dept of Internal Affairs, under Section 14 of the Act. You requested the following information relating to Maternity Services provided by the Counties Manukau DHB.

- 1) **What is the cost per primary birth in the provider arm?**
- 2) **What is the cost per 48 hours postnatal stay in the provider arm?**
- 3) **What was the cost to re-commission the old ward?**
- 4) **What was the cost to orientate the staff to operate the post-natal ward?**
- 5) **Do they have a midwifery case-load team?**
- 6) **What is the average length of post-natal stay for primary births (June 2018 to May 2019 inclusive)?**

Our responses are below each question.

Question 1: What is the cost per primary birth in the provider arm?

We can provide the Ministry of Health National Price for primary birthing units for 2018/19 (below).

- For fiscal year 2018/19, this price is \$2,928.

This price includes a birth event and an overnight postnatal stay for mother and baby.

Please note this does not reflect the actual cost for all birthing events, and is for a birth in a *Primary Birthing Unit* only. We note that not all births at the Middlemore Hospital are 'primary' births, and costs are therefore not comparable to these costs.

Further details of these costs, related to providing primary birthing services is commercially sensitive information, and we do not believe this sensitivity is outweighed by the public interest. We are declining to release this, under S(9)(j) – being to enable us to carry out, without disadvantage, commercial negotiations.

Question 2: What is the cost per 48 hours postnatal stay in the provider arm?

See above – an overnight stay is included in the national price for primary birthing units.

While some women do remain on the Maternity ward at Middlemore Hospital, some mothers and babies already transfer to one of our Primary Birthing Units for post-natal care.

Question 3: What was the cost to re-commission the old ward?

Ward 21 was already established as a ward, having been converted for clinical use in 2018.

The total expected (and approved) additional cost to women's health is related to annual operating costs (mainly staff) for the ward at full implementation was \$4,757,876. The total staffing costs include direct costs such as staffing and clinical and non-clinical supplies, but exclude cleaning, orderlies, patient meals and other non-direct cost. Capital costs are minimal, for items such as additional cots, small equipment and additional vital signs monitors.

A three-stage approach to implementation is underway, with occupancy beginning in May 2019, and full capacity across both floors expected to be reached by December 2019. The changes made do not provide any additional birthing capacity, nor will there be any babies present on this ward. It will provide antenatal beds, with some used as flexi-beds for gynaecology care, and for post-natal mothers whose babies are admitted to the neonatal unit. In May 2019, the ward was opened for 12 women, with existing staff, from the maternity ward, and ongoing successful recruitment will enable additional beds to open in a phased manner.

Question 4: What was the cost to orientate the staff to operate the post-natal ward?

We do not track orientation costs per staff member. On average, our new Midwifery/ Nursing staff receives a two-week rostered orientation when they commence employment, with ongoing support over the next 6-12 weeks. We have ongoing training programmes for new graduate midwives and nurses through their first year.

As above, we note that no birthing or direct post-natal care will occur in the new ward. At Middlemore Hospital, birthing will continue to occur in the Birthing and Assessment unit, and post-natal care will occur in the existing Maternity Ward. We expect that the additional ante-natal capacity created by the opening of the new ward, and reconfiguration of the Maternity Ward will enable women that require a longer stay at Middlemore, especially those with babies in and transitioning from the Neonatal Unit to be better accommodated.

Question 5: Do they have a midwifery case-load team?

As above, the clinical rationale for this reconfiguration is not related to adding primary birthing capacity. Therefore, there is no midwifery case-load work in the new ward.

Question 6: What is the average length of post-natal stay for primary births (June 2018 to May 2019 inclusive)?

The average Length of Stay for a postnatal stay at a Primary Birthing Unit is 2.0 days

I trust this information satisfactorily answers your query. If you are not satisfied with this response you are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act.

Please note that this response or an edited version of this may be published on the Counties Manukau DHB website.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'F. Apa', enclosed in a light blue rectangular box.

Fepulea'i Margie Apa
Chief Executive Officer
Counties Manukau Health