

19th February 2021

[REDACTED]

[REDACTED]

Dear [REDACTED]

Official Information Act Request for – Maternity Services Deep Dive

I write in response to your Official Information Act request received by us 4th February 2021, you requested the following information:

- **“Copies of any reports or documents regarding the Maternity Services Deep Dive (which was discussed privately at the December board meeting).”**

Counties Manukau Health Response:

For context Counties Manukau Health (CM Health) employs over 8,500 staff and provides health and support services to people living in the Counties Manukau region (approx. 601,490 people). We see over 118,000 people in our Emergency Department each year, and over 2,000 visitors come through Middlemore Hospital daily.

Our services are delivered via hospital, outpatient, ambulatory and community-based models of care. We provide regional and supra-regional specialist services i.e. for orthopaedics, plastics, burns and spinal services. There are also several specialist services provided including tertiary surgical services, medical services, mental health and addiction services.

- **“Copies of any reports or documents regarding the Maternity Services Deep Dive (which was discussed privately at the December board meeting).”**

Attached as appendix 1 is the Division of Women’s Health Presentation to the Hospital Advisory Committee on the 16th December 2020 relating to the Obstetric Deep Dive.

Figure 1 below is an extract from the minutes of the meeting referenced above (16th December 2020). This is the only part of the minutes that falls within the scope of your request.

4.2 Maternity Services Deep Dive – Presentation (Chris Mallon, Dr Sarah Tout, Mary Burr)

Ms Mallon, Dr Tout and Ms Burr provided a presentation to the meeting. Key points:

- *The service is at the beginning of a primary birthing strategy project which has been shared with Mana Whenua who is very supportive.*
- *Service comprises 435 staff plus Lead Maternity Carers (LMC) in the community.*
- *Services provided include primary, secondary and some tertiary birthing services, 24-hour obstetric care, antenatal, postnatal, community midwifery, perinatal loss and contraception.*
- *7,720 babies are delivered in Counties Manukau each year, the highest of any DHB.*
- *The population have complex health and social issues. In 2019 44% of women delivering had a BMI of over 30 (obese), 12.6% had gestational diabetes mellitus, 14% were smoking on admission for their birth and 63% lived in socioeconomically deprived areas.*
- *There is an increasing demand for secondary care mostly due to increasing LSCS and IOL rates.*
- *Thirty percent of deliveries may be suitable for a primary birthing unit but only 10% are using them.*
- *Challenges – health risks compounded by socioeconomic deprivation, increased demand for secondary care and acute gynaecology, shortage of midwives, ageing facility, split sites, more theatre access required, lack of high dependency obstetric unit, equitable access to free pregnancy scanning.*
- *Opportunities – ensure services are designed in ways most likely to equalise the health outcomes of disadvantaged social groups, investing in whaanau health in proposed Community Hubs set in primary birth units (first 2000 days).*
- *\$1M shortfall (excluding the cost of pregnancy ultra sounds) between the Ministry top slice funding and the DHBs costs. The complex health issues also contribute to this shortfall.*

Ms Brown asked what the DHB could do to address the mechanism for funding. Ms Mallon advised that the Ministry is aware and are reviewing the funding model.

Dr Perese asked if there is antenatal care for Pacific women. Ms Mallon advised that antenatal clinics are run at all three primary units and many LMCs will run clinics in the community.

Ms Glenn asked that the presentation be uploaded to the Diligent resource centre.

Action: Secretariat to upload Maternity Services Deep Dive presentation to Diligent Resource Centre.

Figure 1: Extract Hospital Advisory Committee Minutes 16/12/2020

I trust this information answers your request. You are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act. Information about how to make a complaint is available at www.ombudsman.parliament.nz or Freephone 0800 802 602.

Please note that this response or an edited version of this may be published on the Counties Manukau Health website. If you consider there are good reasons why this response should not be made publicly available, we will be happy to consider this.

Yours sincerely

A handwritten signature in black ink, appearing to be 'F. Apa', enclosed in a thin black rectangular border.

Fepulea'i Margie Apa
Chief Executive Officer
Counties Manukau Health

Appendix 1: Division of Women's Health Presentation - Obstetric Deep Dive

Maternity Services at CM Health

Mary Burr, Sarah Tout, Chris Mallon

December 2020

An overview of our maternity services, highlights and challenges

Our Vision

All women living in Counties Manukau have equitable access to woman centred, compassionate, quality assured, evidence based and culturally appropriate women's health care in a setting that suits their needs across the course of their life.

Improving the health of women in Counties Manukau is an investment in the future health and wellbeing of our population. Their wellbeing strongly influences the wellbeing of future generations and communities.



Who are we?

The Division consists of a total of 435 staff members plus Lead Maternity Carers:

23 Senior Doctors

23 Junior doctors including house surgeons, registrars and fellows.

113 DHB employed midwives

164 registered nurses and health care assistants

A further self employed workforce delivers maternity cares as community Lead Maternity Carers (LMC) – with approx 130 practitioners

(This workforce also manages gynaecological conditions at CM Health)

Where are we located?

- **Middlemore Hospital**- 6 inpatient wards in the Galbraith block, including the Birthing and Assessment Unit, Maternity Wards, Gynaecology Care Unit.
- **Manukau Health Park**- Module 10 and MSC 2nd Floor Maternity Access Clinic for outpatient clinics
- **3 Primary Birthing Units** – Pukekohe, Papakura and Botany Downs providing birthing, postnatal care and clinic facilities
- **Theatre lists at Middlemore Hospital** for caesareans and other birth related surgeries (lists at Manukau Surgery Centre for gynaecology)
- **Lambie Drive Community Midwifery team** and Community BF support Te Rito Ora. Kaitipu Ora community support workers

Maternity Services we provide

- Primary, secondary and some tertiary birthing services
- 24 hour acute obstetric care, emergency caesarean sections/assisted deliveries
- Antenatal – acute assessment, planned assessments/procedures
- Postnatal – inpatient care including secondary obstetric and neonatal care, breast feeding advocates and lactation consultants, newborn screening
- Community midwifery – outpatient antenatal/postnatal visits/ infant nutrition, social support services – social work and community health
- Perinatal Loss Services
- Contraceptive Services

Birthing Demographics

2019

What makes Counties Manukau women unique

Highest Number of Birthing Women of Any DHB

8301 Counties Manukau domiciled women birthed in 2019 of which **87.6%** birthed in Counties facilities (includes Otahuhu 240 women, otherwise 84.7%)

7527 total of women who birthed in a Counties Manukau facility

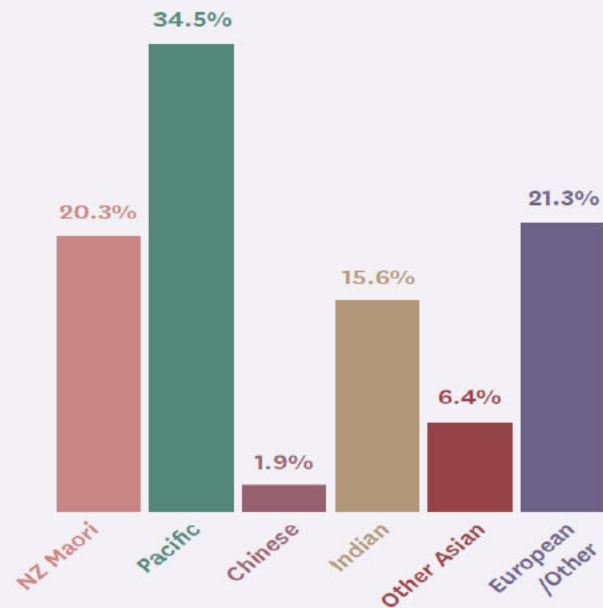
+ 102 women birthed in a private provider facility (May-June 2019)

+ 91 women birthed at home

7720 women birthed within Counties Manukau – Total number of women CM Health is responsible to provide secondary care for if/when required

2880 women transferred from Middlemore Hospital for care after birth in CM Health Primary Birthing Units, closer to home.

Vibrant and Diverse Birthing Population



Complexity

2019

Complex health and social needs – risk factors known to make birthing more complex



44% of women had a BMI over 30 (**obese**)

12.6% have gestational **diabetes mellitus (GDM)**



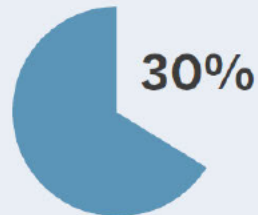
63% of Counties Manukau birthing women live in the most **socioeconomically deprived** areas.

14% smoke on admission for their birth



Increasing demand for secondary care

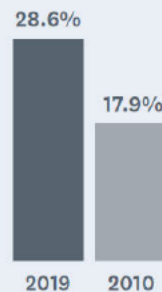
Estimated suitable for primary birth



2019-2020

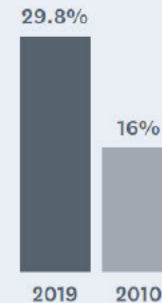
LSCS rates

Mostly due to increased number of emergency caesareans but also impacted on by subsequent ELSC in following pregnancies



IOL rates

Increase related to Reduced Fetal movement Guideline, SGA (small for gestational age) Guideline and increased complexity of women.



Highlights

- Team dedicated to serving women and whaanau
- Experienced practitioners working alongside new graduates in all disciplines
- Nationally well regarded graduate midwifery programme.
- Initiatives such as Maternity Access Clinic (MAC) have made more efficient and timely pregnancy assessments possible - an impressive difference.
- Strong research output and appointment of first specialist research midwife
- Strong collegial relationships across professional groups
- Focus on conditions prevalent in the CM Health population such as obesity, gestational diabetes
- 7720 births in CM Health region in 2019 – highest of any DHB in the country

Challenges

- Health risk factors compounded by socioeconomic deprivation includes obesity, diabetes and smoking are increasing complexity.
- Increased demand for secondary maternity care & acute gynaecology services.
- Midwifery workforce shortage
- Facilities- ageing, unsuitable, shared rooms, limited access for whaanau
- Split sites – MMH and MSC, Theatres and NICU creates challenges
- Requirement for more theatre access- 24/7
- Lack of obstetric high dependency unit
- Equitable access to free pregnancy USS

Opportunities

- To provide a world class women health service
- To achieve equity in women's health by ensuring services are designed in ways most likely to equalise the health outcomes of disadvantaged social groups
- To improve the health of the community by investing in whaanau health (e.g. first 2000 days) in proposed Community Hubs set in Primary Birthing Units.
- With at least 7720 opportunities per annum to engage with women and whaanau during a pregnancy and birth.

Secondary Care

- We offer comprehensive secondary specialist led maternity care
- Antenatal clinics at Manukau Super Clinic, Papakura and Pukekohe Primary Birthing Units
- Specialised clinics – Obstetric Medical, Diabetes in Pregnancy, Fetal Medicine, Pre-term birth, Maternity Assessment
- 24/7 on-site specialist team working along side midwifery staff for antenatal inpatient, birthing and postnatal women
- Train the next generation of specialists (RANZCOG training programme)
- Our population presents with complex and challenging medical co-morbidities

Obesity - Obstetrics

- Most pregnancy risks and complications increase (miscarriage, gestational diabetes, premature birth, hypertension, cardiac dysfunction...)
- Birthing can be more complex, interventions more likely (early labour induction, assisted delivery and caesarean section)
- In parallel neonatal risks increase (birth trauma, admission to the neonatal unit, hypoglycaemia, neonatal jaundice...)
- Any surgery is technically more difficult, cases longer, longer recovery with wound infections 10 x more likely
- Priority populations over represented under obesity data

Gestational Diabetes (GDM)

- **Diabetes in pregnancy** is a growing concern due to the high rates of women entering pregnancy with obesity
- Women with any type of diabetes during pregnancy (gestational diabetes mellitus, Type 1 and Type 2) have increased risks of developing major pregnancy complications that will require secondary care.
- The number of women who birthed in CM Health facilities with gestational diabetes mellitus quadrupled between 2006 and 2019, from 3.1% up to 12.6%.
- In 2019 40% (382) of all women with GDM were Pacifica compared to 15% (146) European/other.
- There is an increase in the percentage of births to Indian women with GDM, from 9% to 22%.

Primary Birthing- Current State

- Focus on use of Primary Birthing Units for those not needing secondary care is key.
- 30% of birthing population are suitable for primary setting- only 10% are currently using PBUs.
- Shortage of midwives may be a factor in reduced use of primary units
- Current design/state/model of primary units is a factor in use of PBUs.
- Private provider offering birthing services in CM Health
- Population is growing and births while steady are predicted to climb.
- PBUs are well supported by women for postnatal care.

Primary Birthing- Top Slice Funding

- Cost of running Primary Birthing Services at CMH in 2019-20 was **\$12,035,303.00**
Top Sliced Funding received from MMH was **\$11,084,518.00 (\$950,758)**.
(NB Increased to \$11,618,728 in 20-21)
- Includes services provided in Birthing and Assessment Unit (MMH), Maternity Administration Services, 3 x PBUs and in our Community and Caseloading Midwifery Services.
- Does not include cost of pregnancy USS
- CM Health Primary Birthing provides services to 30% of our birthing women either in PBUs or at MMH.
- Note a private unit has been providing primary birthing services in CM Health region since May 2019 (services provided by community LMC midwives).

Primary Birthing Utilisation and Costs

Primary Birthing Volumes– 2017 to 2020

Birth volumes at primary birthing units or at home

	PBU	Home	Total
FY 2017/18	778	112	890
FY 2018/19	707	172	885
FY 2019/20	638*	176	968

* NB: 153 babies were born in a private facility in 19-20

Postnatal Transfers from MMH to PBUs

	Botany	Papakura	Pukekohe	Total
FY 2017/18	1675	920	449	3044
FY 2018/19	1633	938	451	3022
FY 2019/20	1287	804	417	2508

Cost of running PBUs-19-20 f/y

Botany PBU	Pukekohe PBU	Papakura PBU
\$2,094,359	\$1,572,891	\$1,960,456

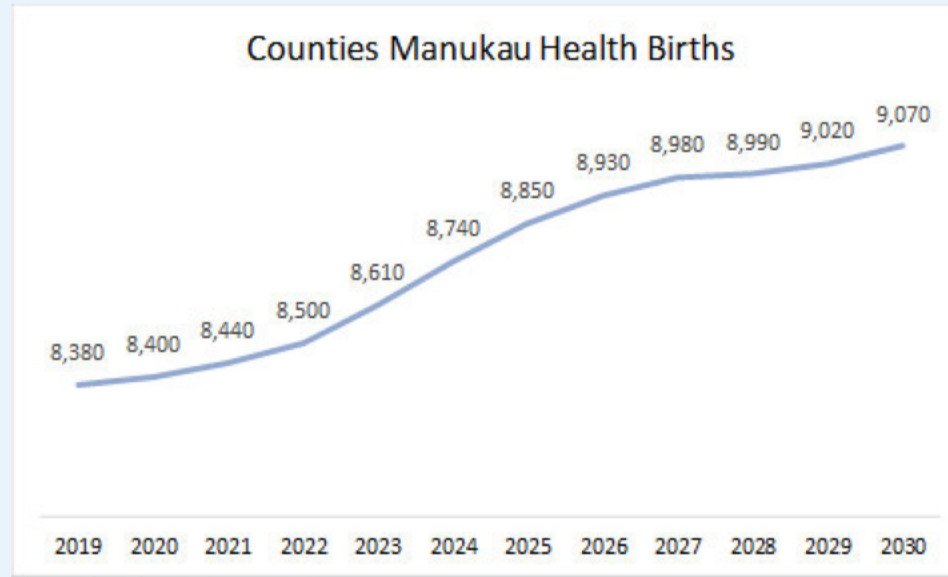
- Increasing use of PBUs for primary birthing is imperative
- Use of Primary Units for postnatal care is vital, costs considerably less than MMH.
- Investment in PBUs is key.

Primary Birthing by Ethnicity

Birthing data below by ethnicity during 2019-2020 highlighting % birthing at PBUs

Ethnicity	MMH	Botany	Papakura	Pukekohe	Total	PBU	% of Births at PBU
NZ Maori	1316	51	81	82	1530	214	14%
Pacific	2489	61	35	15	2600	111	4%
Chinese	127	13		2	142	15	11%
Indian	1128	15	20	14	1177	49	4%
Other Asian	451	16	9	2	478	27	6%
European/Other	1294	97	57	152	1600	306	19%
Grand Total	6805	253	202	267	7527	722	10%

Birth Prediction to 2030



- Currently running on track with growth.
- Awaiting updated prediction data as at end of 2020.
- Predicting an increase related to increased housing in Counties Manukau and population returning to NZ during 2020 (may be offset by declining immigration)

Primary Birthing – Future

- Ongoing promotion of physiological birth and use of primary units.
- Close liaison with cultural partners to develop models of service delivery that meet the cultural needs of our communities.
- Co-design with women and whaanau
- PBU - embedded in community. Co designed models of care - driven by the needs of the community
- Updating current facilities versus new greenfield sites
- Investment in primary maternity is vital

Perinatal Loss Service

Vital support required for Pregnancy Loss

- Holistic Service design being developed
- Midwife/Nursing clinical specialist roles in place
- Support for existing role for over 20 week loss
- Impact of Abortion Legislation Changes still being assessed.
- Wrap around care for women and whaanau is key.

Summary

- We are proud of our staff and the work they do in our maternity services in the hospital, community and in partnership with our lead maternity carer (LMC) colleagues.
- Our teams work under challenging conditions – ageing facilities, workforce shortages and the increasing clinical complexity that arises from obesity and the many socioeconomic determinants that impact on our community.
- Our future focus includes ongoing promotion of primary birthing units, the development of culturally appropriate birthing models and community hubs which provide holistic women and whaanau centred care.
- We have a great opportunity to invest in the health of our community through our investment in Women’s Health Services.

Thank you

- Questions

