

“A future for maternity services”

**Public consultation document on a model for
maternity services provided by Scarborough &
North East Yorkshire Healthcare Trust.**

December 2006

We want to know your views....

We would like to know what you think about the proposals in this document. The consultation period runs from Thursday 21st December 2006 until 18th March 2007. We hope that you will use this opportunity to tell us your views and influence the shape of maternity services for the future.

You can share your views with us by:

- Attending one of the many meetings we will be holding throughout the consultation period. These will be advertised in your local press
- Sending comments in writing to us at the following address:
Scarborough & North East Yorkshire Healthcare Trust
Scarborough Hospital
Woodlands Drive
Scarborough
North Yorkshire
YO12 6QL
- Fax us on: 01723 377233
- Telephone us on:
Scarborough & North East Yorkshire Healthcare Trust PALS: 01723 342434
- Completing the feedback form inserted in this document (more copies available by phoning the above number)
- Submitting comments through our website www.scarborough.nhs.uk and clicking on "Contact us" then "Feedback".
- Submitting your comments by email at contactus@acute.sney.nhs.uk
- Sharing your views with:
Your local Council's Overview and Scrutiny Committees.
Your local Patient and Public Involvement Forum
Details on how to contact these organisations are available on our website

PLEASE MAKE SURE YOU GIVE US YOUR VIEWS BY FRIDAY 18TH MARCH 2007

Welcome...

This document describes our public consultation exercise - asking you, our patients, local people, and local organisations, about the options for a future model for provision of maternity services for Scarborough & North East Yorkshire Healthcare Trust.

The document sets out some options for a future model for provision of maternity services for Scarborough & North East Yorkshire Healthcare Trust. Our options have been developed from discussions over recent months in partnership with local people with key groups including our midwives, consultant obstetricians, local GPs, and ante and post natal groups; the Public and Patient Involvement, Bridlington Town Council and North Yorkshire County Council. These people have already taken part in different discussions to help shape this report and we look forward to many more of you sharing your views with us on the options and issues it sets out.

You will know how important it is to get the care that is right for you. Pregnancy can be a worrying time and women need a lot of advice and support. Pregnancy is also an important opportunity for the health service to support you in making healthy lifestyle choices that are good for you and your baby.

We know that it is often those of you that need our care the most who find it hardest to access our services. We want to change this. You will be able to refer yourself directly to your local midwife as soon as you know you are pregnant - or even if you are thinking about becoming pregnant and want advice.

We describe a future in which our maternity services provide high quality, safe, maternity services. Making this part of our vision a reality will depend on taking some decisions about the future shape of our maternity services. We now want to hear everyone's views on our options for maternity services. Thank you for your interest and please let us know what you think.

Richard Grunwell
Chairman

Iain McInnes
Interim Chief Executive

Dr Ian Holland
Medical Director

What is this document for?

The key purpose of this document is to seek your views and suggestions on the options for future model for provision of maternity services for Scarborough & North East Yorkshire Healthcare Trust that will ensure local access whilst ensuring that services are safe and sustainable into the longer term. The range of maternity services for Scarborough & North East Yorkshire Healthcare Trust services available also needs to give us the best value for public money.

We want to provide as much care as possible closer to people's home and ensure high quality, safe maternity services. We want you to have the right care, in the right place at the right time.

Achieving this will depend upon a wide range of decisions and actions. Some of the decisions we will have to make will be straightforward, but some will be difficult and will require significant changes in the way we currently organise and provide our services.

What does the consultation cover?

The consultation covers the options for a future model for provision of maternity services for Scarborough & North East Yorkshire Healthcare Trust.

The achievement of an affordable clinically safe maternity service for local people is a joint objective for both Scarborough and North East Yorkshire Healthcare Trust and North Yorkshire and York PCT and East Riding of Yorkshire PCT as our main commissioners of maternity services.

What do our proposals cover?

You will know how important it is to get the care that is right for you. Pregnancy can be a worrying time and women need a lot of advice and support. Pregnancy is also an important opportunity for the health service to support you in making healthy lifestyle choices that are good for you and your baby.

We know that it is often those of you that need our care the most who find it hardest to access our services. We want to change this. You will be able to refer yourself directly to your local midwife as soon as you know you are pregnant - or even if you are thinking about becoming pregnant and want advice. We will locate midwifery near to health visitor services in places that are convenient to you, such as children's centres. These developments will help reduce the inequalities that currently exist in your baby's life chances.

Where you are found to be well with no medical or pregnancy complications the midwife will be your lead carer and will support a normal childbirth. Further developments of the

homebirth service will mean that this becomes a real alternative for all women where a straightforward birth is anticipated.

We aim to change the way that midwives work so that you have a midwife you know throughout pregnancy and childbirth and so that we can provide more personal support and advice to you during pregnancy. There will be more midwives with the special skills needed to support individual women's social, cultural and clinical needs, such as support for young parents and those women for whom English is not their first language.

If you have complex needs you will still receive all the support you need from your midwife but our hospital doctors will hold clinics in your local communities to make it easier to get the specialist advice you need.

Health visitors will continue to support mothers to provide their babies with a healthy start in life. They will target their services flexibly giving you the right amount of support that you need.

The options for a future model for provision of maternity services for Scarborough & North East Yorkshire Healthcare Trust include:

- Ante natal and post natal obstetrics and maternity care, including ultra sound, provided by consultant staff and midwives; further strengthened by increased consultant obstetrician out patient service.
- An option to discontinue Home from Home births at Bridlington, Malton and Whitby Hospitals on the grounds of patient safety and public misperception that delivery in these hospitals is safer than a home birth.

How where these proposals developed?

Working with the PCTs we want to provide as much care as possible closer to people's home and ensure high quality, safe maternity services. We want you to have the right care, in the right place at the right time.

We have already involved many local people in developing these proposals and we want to make these decisions with the broad support of our local communities. This document sets out how we propose to develop services in the future.

Our options have been developed from discussions over recent months in partnership with local people with key groups including our midwives, consultant obstetricians, local GPs, and ante and post natal groups; the Public and Patient Involvement, Bridlington Town Council and North Yorkshire County Council. These people have already taken part in different discussions to help shape this report and we look forward to many more of you sharing your views with us on the options and issues it sets out.

The views shared with us during this recent series of events have been invaluable in helping us to develop these proposals and we are committed to continuing to involve local people in planning and implementing changes in health provision.

The achievement of an affordable clinically safe maternity service for local people is a joint objective for both Scarborough and North East Yorkshire Healthcare Trust; North Yorkshire and York PCT and East Riding of Yorkshire PCT as our main commissioners of maternity services.

We need to deploy our resources in a more efficient and equitable way, thereby making the best use of medical and technological advances. This supports the trust in delivering better care and support more conveniently for the local population.

Some work has taken place to look at how health care services could be developed to provide better care for all through new models of care that would treat a greater proportion of patients closer to home, giving them greater independence as well as better health.

Some of the things you told us...

- You like local services and strongly support your local community hospitals
- You recognise need to travel but want least travel possible
- As expectant mothers you would like to continue to have a named midwife or small group of known midwives throughout your pregnancy and childbirth
- Maternity changes would be viewed as service cut with some concern on potential extra travel; BUT you recognise the specialist nature of medical support and realised this could not be provided by GPs
- For diagnostic tests, ultrasound and out patient appointments, you would like these in a place as convenient as possible

How can you help us...

We want the views of the people who will be most affected by the proposals we are making so that we can provide the best possible service. This consultation is therefore formally being carried out in those areas where the public use our current maternity services.

There will be a full media briefing to launch the consultation. The full consultation document will be automatically sent to the people and organisations listed at the end of this document as “Formal Consultee list”; the document is also available to anyone on request from the Scarborough & North East Yorkshire Healthcare Trust.

A Summary Document will be widely available (e.g. libraries, GP surgeries). Feedback forms will be available in all documents and the summary.

The consultation is running from Thursday 21st December 2006 to Friday 18th March 2007. You can help us by telling us:

- What you think about our overall vision for maternity services in the future.
- What you think about our proposed options for obstetric and maternity services
- About any ideas you think we should consider which are not already included in the document.

The final pages of this document list the many ways by which you can feed in your views. These include:

- Completing the questionnaire at the end of this document and returning it to us.
- Representative Groups can request Trust attendance at their meetings.
- Public (and stakeholder) meetings will be held across North East Yorkshire

What will happen after the consultation period?

The consultation period finishes on Friday 18th March 2007; the Trust Board will review the results of the consultation at a Public Board meeting held on 27 March 2007. The outcome from the consultation will be widely publicised through publishing a document setting out the comments received and our response to them.

How are Hospital Services developing?

Hospital services locally have changed considerably over the past five years. The Scarborough and North East Yorkshire Healthcare Trust was established in April 2002 and now provides hospital services through clinical teams working on two sites. The Trust also provides an outreach service for out-patient services and home from home births minor at community hospitals in Malton and Whitby and at Bridlington Hospital.

We provide two types of services for women at four hospital sites comprising maternity care and gynaecology. The maternity service is by far the larger of the two. In 2005, 1482 babies were born in Scarborough, with 34 babies born in Bridlington, 46 babies born in Malton and 58 babies born in Whitby.

91% of the expectant mums who lived in Bridlington delivered at Scarborough; 85% of expectant mums in Malton delivered at Scarborough; and, just 68% of the expectant mums in Whitby delivered at Scarborough.

Any changes to the way we provide our maternity services will have implications for how we provide gynaecological services. This is because the same doctors who care for pregnant women also treat women with gynaecological problems.

Our approach to maternity services:

- We will not treat childbirth as an illness and midwives will support well women to birth their babies with minimum intervention.
- If you need obstetric care it will be safe and reliable and of the highest quality because obstetricians will be able to spend more time directly supervising labour wards.
- Your baby's life chances will not depend on where you live and we will reduce inequalities in the provision of healthcare which can contribute to babies being born with a low birth weight or stillbirths.
- You will be cared for by the same midwife or small team of midwives throughout your pregnancy.
- You will have one-to-one care during labour helping to ensure that birth is a positive experience.
- You will be cared for by professionals working as an integrated team to secure the best possible outcomes for you and your baby.

This will mean:

- One-to-one care for women in labour
- More homebirths and births in a dedicated unit run by midwives for well women anticipating uncomplicated labour and birth (but with obstetric support closely available if complications occur and specialist support is required)
- Fewer caesarean sections
- Agreed individual care pathways for women with pregnancy and birth complications

Working in collaboration with the PCT we will seek to ensure:

- Fewer low birth weight babies
- Fewer mothers smoking
- More babies being breast-fed.

Why do we need to change Maternity Services?

We want women to be cared for by midwives who are trained to support normal birth processes. We want to further develop the skills and expertise to promote normal birth and to increase homebirths and support midwife led care in a single purpose designed midwifery led unit; run by midwives

We need to introduce different ways of working for midwives that will improve your continuity of care during pregnancy, birth and post natally, including one-to-one care during labour

We need to train more midwives to work with those of you with specific social or clinical needs, e.g. teenage mothers, women requiring language support or women with disabilities

Our midwives are required to undertake refresher training at regular intervals in order to maintain their professional registration. Within the Trust we are firmly committed to ensuring our midwives maintain and develop further their skills. The proposed changes will ensure all midwives receive regular update training in both community and hospital setting.

We need to develop more support for you post natally to reduce the incidence of post natal depression and engage with you and your families earlier through Sure Start Centres and successor children's centres.

We know that many of you in our local communities do not always access the care you need during pregnancy, or do not access it early enough. To address this we want to increase the support available to you by providing more of our specialist antenatal care out in the communities that need it most.

We also want to make it easier for you to access our services by providing them in places you already use, e.g. Children's Centres.

Although we will strive to ensure pregnancy and birth remains straightforward, there will always be those of you who develop complications either before or during pregnancy or where added support is anticipated for labour and birth. In these situations it is vital for the safety of the mother and child that there is access to highly trained medical and midwifery staff who can manage the care throughout the delivery and have access to excellent support facilities before, during and after the birth. These will include neonatal support and special care baby units.

To continue to provide the best possible obstetric care we need to meet standards set by the national NHS Litigation Authority (the body that insures hospitals for clinical safety). At the moment we are assessed at Level 1. We want to achieve Level 2. To do this we need to improve our services in two ways. We need to provide dedicated anaesthetic support for our obstetric service. We also need to have consultant

obstetricians dedicated to the delivery suite for at least 40 hours a week; which we have recently achieved.

What is the current service?

Currently Scarborough Hospital offers a midwife led service combined with the current labour ward. If our proposals are implemented we will establish a dedicated midwife-led unit. This unit will provide care to women in labour who are healthy and where a straightforward delivery is anticipated. Midwives would staff it, with visiting midwives from local community teams supporting their mums. There would be no obstetricians present, although they would be imminently available in the event that any complications occurred.

The Maternity unit at Scarborough will be supported by an establishment of 58.38 WTE Midwifery, of which 46.63 WTE are trained midwives and 11.75 WTE are Maternity Care Assistants.

The services provided are that of an acute obstetric unit catering for approximately 1500 deliveries per annum, supported by a Special Care Baby Unit. Facilities include a 5 labour rooms, an obstetric theatre, 20 ante/post natal beds, an antenatal day assessment unit and an early pregnancy assessment unit . Women at booking are provided with an option for Consultant led care or midwife led care.

Additional investment to increase the current services at Bridlington, Malton and Whitby Hospital to consultant led birth services will drain investment from our crucial community midwifery services. These community services are pivotal to achieving our vision for future services. We believe we would provide the best care for women throughout their pregnancy if we were to provide both midwifery led and inpatient obstetric services from one site only.

All antenatal and community post natal care would continue to be provided in the community and, in many cases, even closer to your home

In considering all of the possible models for future services, we believe that the only realistic solution that will allow us to take forward our vision for high quality safe services in hospital together with strong community services is to provide obstetric services from one hospital site only. This will mean we can:

- Provide safer hospital services for those of you who need to be supervised by an obstetrician during labour and need access to an anaesthetist with special skills in obstetrics
- Increase the capacity of our community midwifery services so that we can provide better care to vulnerable women and support well women to have a normal childbirth.

However, there are choices to be made about how we provide our midwife-led care. Our preferred approach would be to have a midwife-led unit on the Scarborough Hospital site. This would mean that women expecting a normal delivery would have the opportunity for a midwife led birth in Scarborough, (or Hull, Middlesborough or York), as well as have a real option to birth at home should they so choose.

Which services need to change?

For all the reasons described above, we believe we need to change the way we provide some of our maternity services at Bridlington, Malton, Scarborough and Whitby Hospitals.

The areas for change are:

- An option to discontinue Home from Home births at Bridlington, Malton and Whitby Hospitals on the grounds of patient safety and public misperception that delivery in these hospitals is safer than a home birth.
- Establish Integrated Midwifery Teams within Scarborough, bringing together hospital and community midwives, to deliver a service to expectant mothers in the Scarborough area working within a defined geographical area.
- Increased consultant obstetrician out patient service will be available on some sites, dependent on patient need.

The midwifery department proposes to redesign midwifery at Scarborough Hospital in the following way;

- The establishment of 3 integrated midwifery teams staffed by 8 WTE midwives. Midwives working within the teams will endeavour to provide continuity of carer during the ante/postnatal period with intra partum care being provided on a 24 hour basis from within the team setting, irrespective of place of delivery.
- The obstetric unit and midwifery led suite will be covered by a core team of midwives and maternity care assistants with some of these later roles taking on skills such as scrubbing at Caesarean Sections.

In addition to this, care pathways for women will be designed following an integrated approach to care and all women will be offered the appropriate choice for lead professional at booking.

The whole aim of this change is to improve the service for local women and their families, providing a more flexible approach to care and greater choice.

Which services will be unaffected?

- Ante natal and post natal obstetrics and maternity care, including ultra sound, will continue to be provided by consultant staff and midwives; further strengthened by increased consultant obstetrician out patient service.
- A dedicated locally based community midwife team will continue to cover each of the areas of Bridlington, Malton and Whitby.
- All our midwives will receive annual update and refresher training making sure their clinical skills are fully maintained.

Options for the future role of maternity services...

Option	Question	Disadvantages /Advantages
No change	What would be the consequences of leaving services as they are?	<p>We will not be able to fully reduce inequalities in the provision of healthcare, which can contribute to babies being born with a low birth weight or stillbirths; thus, your baby's life chances may still depend on where you live.</p> <p>Home from Home births at Bridlington, Malton and Whitby Hospitals will continue to be perceived as safer births simply because they are in a hospital .</p> <p>The likelihood of being cared for by the same midwife or small team of midwives during your delivery will be more difficult for those mums who develop complications during the delivery period.</p> <p>There would be no integration of the midwifery teams in Scarborough; expectant mothers would be cared for by different teams of midwives throughout their pregnancy.</p>

<p>Discontinue Home from Home births at Bridlington, Malton and Whitby Hospitals</p>	<p>Doesn't this reduce the level of service for patients in Bridlington, Malton and Whitby?</p>	<p>If local women want to choose a midwife-led home delivery, we will maintain resources in home-birthing teams to support this.</p> <p>Local mums will be cared for by the same midwife, or small team of midwives throughout their pregnancy.</p> <p>A dedicated locally based community midwife team will continue to cover each of the areas of Bridlington, Malton and Whitby.</p> <hr/> <p>Ante natal and post natal obstetrics and maternity care, including ultra sound, will continue to be provided by consultant staff and midwives; further strengthened by increased consultant obstetrician out patient service.</p>
<p>Increase services at Bridlington, Malton and Whitby Hospitals to provide obstetric led births</p>	<p>Why not invest further in services to deliver a higher level of care with consultant support?</p>	<p>Obstetric services need to be located alongside special care baby units, with paediatric back up.</p> <p>We do not have enough doctors to provide the required levels of cover for labour wards on four sites.</p> <p>We would need to increase our current number of obstetricians significantly. This would be costly and unlikely to be achieved because specialist doctors are difficult to recruit.</p> <p>More importantly it would be investment that, although improving safety during childbirth, would not on its own help us address the issues we know are important to women and local communities such as low birth weight babies, stillbirths, the</p>

		continuity of care for mothers during pregnancy and tackling inequalities in health.
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General issues – Travel and Transport

We know that providing the best services is not enough if people have difficulty accessing them.

During our recent meetings and workshops we found that local people appreciate that services cannot always be in their nearest town and that they support our main aim to keep strong hospital services within our area rather than losing them to neighbouring cities.

Nevertheless, we, alongside the PCT, are committed to improving access to our current services and ensuring that any new service models build in robust plans for making our services accessible to local people.

We have reviewed the way in which expectant mums currently access our services. Understandably it is people without access to their own vehicle or that of a friend, relative or neighbour, particularly in outlying areas, that currently face the greatest difficulties. We will minimise the burden of travel that falls on this group of expectant under any future agreed service model.

The vast majority of expectant mums will receive all their ante and postnatal care in their local community. The actual process of delivering their baby may be undertaken at a hospital that is a short distance away. In most instances mums spend a very short time of stay in hospital following childbirth.

However, we are setting up a review group, to look at how we can best support expectant mums who may be dependant on public transport, to explore options to alleviate the issues raised by proposals put forward in this document.

Initial discussions have identified the following possible solutions:

- Ensure timing of appointments maximises people s ability to use travel cards and discounted fares
- Taxi vouchers and national travel tokens.

Until the future model of service provision is agreed we cannot plan transport solutions in detail. Over the next few months our review group will explore these options. We are

committed to ensuring that we have identified realistic transport solutions to ease difficulties people will face.

These proposals may also require us to review and develop the provision of emergency ambulance services. We are committed to working with the Yorkshire Ambulance Service to ensure that appropriate high quality, responsive ambulance services are available to ensure the timely and safe transfer of patients to the most appropriate hospital site to receive specialist care, should the proposed changes included in this document be agreed following public consultation.

General issues – Financial context

The two PCTs and acute hospital Trust did not achieve financial balance in 2005/06. Undoubtedly all organisations face significant financial challenges in the years ahead, however, the nature of healthcare means that there will always be demands to spend more than is made available and it is therefore important that we ensure that all available funding is put to the best possible use. These proposals for consultation have therefore been developed with the aim of maximising the patient benefit by making the best possible use of that funding and by ensuring value for money.

How fast will change happen?

The vision in this document represents next years plan for local services. Some of the improvements we want to make to services are already happening. These changes include the 40-hour standard for labour ward cover and the update and refresher training for midwives.

However, whether we implement many of the service improvements described in this document depend on the outcome of this consultation. This means that we cannot set out timescales for implementation at the moment. It will, in any case, be difficult to be precise because some of changes we describe would depend upon training staff. Others would depend on making changes to our current hospital facilities.

When we publish our response to your views on these proposals, and our decisions on how we take them forward, we will set out the expected timescales for any change.

Formal List of Consultees

Public Consultation on Future of Maternity Services

Chief Executive, East Riding of Yorkshire Council (ERYC)

Chief Executive, North Yorkshire County Council (NYCC)

Director of Children, Family and Adult Services, East Riding of Yorkshire Council

Director of Children, Family and Adult Services, North Yorkshire County Council

Director of Corporate Services, East Riding of Yorkshire Council

Director of Corporate Services, North Yorkshire County Council

ERYC Councillors – Bridlington, Driffield, Hornsea & Withernsea & OSC members

NYCC Councillors

Chair, East Riding Local Strategic Partnership

Chair, North Yorkshire Local Strategic Partnership

Members of Parliament

Chairs, Town Councils

Chairs, Parish Councils

ERYC Customer Service Centres

GPs ERYPCT

GPs NYYPCT

Scarborough & North East Yorkshire Healthcare Trust staff

Chair, Joint Partnership Group (Trust Negotiation and Consultation Committee)

Chair & Chief Executive, Hull & East Yorkshire Hospitals Trust

Chair & Chief Executive, York Hospital Trust

Chair & Chief Executive, Yorkshire Ambulance Trust

Chair & Chief Executive, Humber Mental Health Teaching Trust

Chair & Chief Executive, East Riding of Yorkshire Primary Care Trust (ERYPCT)

Chair & Chief Executive, North Yorkshire and York Primary Care Trust (NYYPCT)

Chair & Chief Executive, NHS Yorkshire & the Humber

Chief Officer, North Bank Forum

Voluntary Sector

National Childbirth Trust

Members of the East Riding Patient and Public Involvement Forum

Members of the North Yorkshire Patient and Public Involvement Forums

Macmillan Cancer Relief

National Childbirth Trust

Chair of League of Friends Bridlington, Malton & Whitby Hospitals

Chair of Bridlington/Malton/Whitby Hospitals Save/Support our Hospital Campaign Groups

Chairs and Members of Bridlington, Hornsea and Withernsea Health Forums

Women's Institute East Yorkshire Federation

Local Media

Library Services East Yorkshire & North Yorkshire

Rural Partnerships

December 2006

Questionnaire Response form

Thank you for reading the consultation document. Please use this form to let us know what you think. When you have filled in this form, detach it from the document and post it in an envelope addressed to:

Scarborough & North East Yorkshire Healthcare Trust
Scarborough Hospital
Woodlands Drive
Scarborough
North Yorkshire
YO12 6QL

Or hand the completed form in to reception at Scarborough or Bridlington Hospital; or any member of your Community Midwife Team

This form should reach us by 12 noon on Friday, 18th March 2007.

Please tick **one box only** for each question and use the comment boxes provided. If you need more space, write further comments on a separate sheet and attach it to this form.

Question 1:

Do you think we need to change the way maternity services are provided in Scarborough & North East Yorkshire Healthcare Trust? (tick **one**)

Agree

No strong feelings either way

Disagree

Comments: *(continue on an extra sheet if necessary)*

Question 2:

Three options have been outlined in the document. Which option do you support?
(tick **one**)

Option 1 – No change

Option 2 – Discontinue “Home from Home” births at Bridlington, Malton and Whitby Hospitals

Option 3 - Increase services at Bridlington, Malton and Whitby Hospitals to provide obstetric led births

Question 3:

Are there any variations on the three options in the document we should be considering?
(tick **one**)

Yes

No

Don't know

If yes, please describe: *(continue on an extra sheet if necessary)*

If you have an alternative option please state it on a separate sheet and return your comments with the questionnaire.

Question 4:

Do you have any comments about the consultation process? *(continue on an extra sheet if necessary)*

If you have an alternative option please state it on a separate sheet and return your comments with the questionnaire.

Question 5:

Are there any additional views or ideas you would wish the Trust to consider in developing maternity services?

Comments: *(continue on an extra sheet if necessary)*

Question 6:

Which of the following is most important to you, please rank the priority with 1 being most important and 3 being least important?

- Having the same midwife throughout the antenatal period
- Having a known midwife for you in labour
- Having the same midwife providing your post-natal care

Question 7:

Would you be prepared to attend for your antenatal visits at an alternative location to your GP surgery within a reasonable travelling distance being seen by a named midwife within a small team?

Comments: *(continue on an extra sheet if necessary)*

Question 8:

Do you feel that any of the proposed changes would be detrimental to your maternity care experience in any way? And if so in what way?

Comments: <i>(continue on an extra sheet if necessary)</i>

Question 9:

Please take this opportunity to provide us with any other views or comments on this document.

Comments: <i>(continue on an extra sheet if necessary)</i>

You do not have to complete the following information but it would help us analyse the responses we receive.

Question 10:

I am responding to this consultation as:

- A patient
- A member of the public
- NHS staff
- A representative of an organisation/group
- Other (Specify)

Question 11:

The first **three** letters (eg. LA9) of my post code are:

Responses can also be made by:

online www.scarborough.nhs.uk and clicking on “Contact us” then “Feedback” or by email at contactus@acute.sney.nhs.uk

The comments you make will be subject to the Freedom of Information Act 2000.

If you would like **electronic** updates on the consultation review please write your email address here: