



Health Select Committee (Overview & Scrutiny)
Response to
“The Future of the Brent Birth Centre: A Public Consultation”

December 2007

The Health Select Committee has delegated authority from the Council's Overview and Scrutiny Committee to investigate, scrutinise, and develop policy with regards to public health and “well-being”. The committee takes a strategic overview of health services in Brent, facilitating partnership working and promoting further public engagement.

The Committee received a briefing on the 3rd October regarding proposals to consult on the future of the Brent Birth Centre at Central Middlesex Hospital, Park Royal, Middlesex. The formal consultation was launched jointly on the 2nd November 2007 by North West London Hospitals Trust and Brent teaching Primary Care Trust.

Committee members have determined the following response, collated through the Chair.

Maternity care and support is an important issue for Brent as a borough with a diverse, growing, and young population. The Brent Birth Centre is regrettably underused and we understand the history and complexity of factors that have led to this situation. Furthermore, we acknowledge North West London Hospitals Trust (NWLHT) and Brent teaching Primary Care Trust's (BtPCT) efforts to reverse this situation. We are encouraged that both trusts have worked hard to involve and include the views of mothers and future users in driving forward this consultation.

Inevitably, resources are key to the delivery of services and the current situation regarding the Birth Centre is plainly untenable. We appreciate that “doing nothing” is not a realistic option, even more so at a time when the local healthcare economy is under increasing pressure given the tPCT's turnaround status.

We would like to thank the trusts for including the comments and suggestions of the Health Select Committee in the final document and for providing us with a full picture of the issues during the pre-consultation stage.

It is of concern to members that the unit currently operates with only a 16% occupancy rate. This lack of use is clearly not the best use of scarce resources and has a dramatic impact on the morale and career development of retained staff.

Page eight of the consultation document states that travel is “not a major factor” in determining the choice of women within the Brent area with regards to where to have their baby. We will ask the Council's main Overview & Scrutiny Committee to establish a joint task group to examine transport and access issues in relation to healthcare facilities within the borough. This work will also feed into the current consultation on the “Healthcare for London” (Darzi) report and the issues it raises in relation to proposed new models of care for the capital as a whole.

The Committee accepts the case for change outlined on page four of the consultation document. We would question, as members did at our recent briefing, how genuine the option “to do nothing” (Option 1) is. It has been made clear to us that the centre cannot continue under current circumstances. The ability to ensure a continuity of services would be questionable if this option was adopted. Furthermore, there is a

notable lack of detail in the columns outlining this option. For example, there is no mention of the expected duration of this position or contingencies upon inevitable closure.

Option 2 highlights that the “change in location for women living in Brent” would produce a disadvantage in relation to travel. This is despite the earlier assertion that travel is “not a major issue” (Page eight).

Option 4 is stated as the preferred option of the trust and is the most weighted in terms of the listed advantages and disadvantages. It is stated that this option “Improves choice for women living in Harrow” and that they “...would have better access”, however, we state again that this document consistently claims that access is not an issue. Furthermore the disadvantage of “women go elsewhere” is equally applicable to all of the options, yet it only appears in two of them.

It would have been helpful to have further information regarding the possible future uses for the centre. While we hope that it will have “...many useful years of service left” and it can be used to provide “other health services”, a list of the viable development options would have been helpful. Obviously, we understand that in part this is a discussion to be had following the Trust’s decision and that it is difficult to be specific without potentially prejudicing future options. A breakdown of possible areas of future use would, however, have been useful in conjunction with an outline of any restrictions on use which may apply. The committee agrees that proposed services at the site must be both appropriate and compatible with the neighbouring facility and that future use should not compromise Central Middlesex or the care pathway choices of patients.

In response to the questions laid out in the document (page 18):

(1) Do you have any other options which you feel we should consider?

The committee feels that North West London Hospitals Trust has adequately laid out the four possible options for the Brent Birth Centre. It is clear and sensible that the Trust favour Option Four.

(2) If you had to choose a preferred option from this list, what would it be, and why?

It is clear that Option 4 allows for the resources issue to be addressed.

(3) If we were to go ahead with option four what do you think would be the important issues for us to take into account?

Broadly:

- The views of expectant mothers and future centre users.
- Patient care and the quality of future services
- Access and transport
- Staff development

Our other comments relating to questions 4 & 5 have been incorporated into the body of this response.

CIlr Chris Leaman
Chair, Health Select Committee