

# Document Pack

**Democratic Services Section  
Chief Executive's Department  
Belfast City Council  
City Hall  
Belfast  
BT1 5GS**



1<sup>st</sup> June, 2012

## **MEETING OF STRATEGIC POLICY AND RESOURCES COMMITTEE**

Dear Alderman/Councillor,

The above-named Committee will meet in the Lavery Room (Room G05), City Hall on Friday, 8th June, 2012 at 10.00 am, for the transaction of the business noted below.

You are requested to attend.

Yours faithfully,

PETER McNANEY

Chief Executive

### **AGENDA:**

#### **1. Routine Matters**

- (a) Apologies
- (b) Minutes
- (c) Declarations of Interest
- (d) Transforming Your Care - A Review of Health and Social Care in Northern Ireland- Request to present to Committee (Pages 1 - 2)

#### **2. Review of Public Administration**

- (a) RPA Update (To Follow)

#### **3. Democratic Services and Governance**

- (a) Change of Dates of Meetings (Pages 3 - 4)

- (b) Requests for the use of the City Hall and the provision of Hospitality (Pages 5 - 10)
- (c) Allowances for the Lord Mayor, Deputy Lord Mayor and High Sheriff (Pages 11 - 12)

4. **Finance/Value-for-Money**

- (a) Request for Funding – Common Purpose Belfast (Pages 13 - 14)
- (b) Super-connected Cities - Business Briefing Event (Pages 15 - 20)
- (c) Use of Mobile Technology (Pages 21 - 24)
- (d) Tender for the Provision of Insurance Brokering Services (Pages 25 - 26)

5. **Human Resources**

- (a) Standing Order 55 – Employment of Relatives (Pages 27 - 28)
- (b) Corporate Investors in People (IIP) (Pages 29 - 32)

6. **Asset Management**

- (a) Improved Security Measures – City Hall (Pages 33 - 34)
- (b) Office Accommodation Strategy (Pages 35 - 40)
- (c) Smithfield Market Units Update (Pages 41 - 42)
- (d) Forum for Alternative Belfast 2012 Summer School (Pages 43 - 46)
- (e) Passchendaele Commemoration Event (Pages 47 - 48)

7. **Cross-Cutting Issues**

- (a) Developing Belfast as an Age Friendly City (Pages 49 - 52)
- (b) Consultation Response - Belfast Health and Social care Trust - Proposal to Reshape Maternity Services in Belfast (Pages 53 - 92)

**To: The Chairman and Members of the Strategic Policy and Resources Committee**



**Belfast City Council**

<b>Report to:</b>	Strategic Policy and Resources Committee
<b>Subject:</b>	Transforming Your Care: A review of Health and Social Care in Northern Ireland- Request from the Belfast Social Health and Care Trust to present to Committee
<b>Date:</b>	8th June 2012
<b>Reporting Officer:</b>	Siobhan Toland, Head of Environmental Health Ext 3281
<b>Contact Officer:</b>	Siobhan Toland, Ext 3281

<b>1</b>	<b>Relevant Background Information</b>
1.1	In December 2011, the Department of Health, Social Services and Public Safety published <i>Transforming Your Care: A review of Health and Social Care in Northern Ireland</i> which proposes far-reaching changes to the delivery of health and social care over the next five years.
1.2	The report contains 99 recommendations for improvements in the quality of care and requires a shift of resources of £83m (across N Ireland) from hospital to community-based services. This will be enabled by the investment of £70m (across N Ireland) in transitional funding to enable the new model of care to be implemented. It recognises that quality must be improved within a fixed budget.
1.3	Crucial changes will include the extension of personalised care, enabled through the holding of care budgets by clients themselves, and the establishment of Integrated Care Partnerships involving GPs, Community Pharmacists, Health and Social Care Trusts, other agencies and the community and voluntary sectors. One of the opportunities is to access funding for the development of new facilities in the community, building on the current network of health and well being centres. This will allow GPs to co-locate with nursing, social work, therapists, pharmacists, advice centres and others and to work in an integrated way.

<b>2</b>	<b>Key Issues</b>
2.1	The Belfast Local Commissioning Group (LCG) and the Belfast Trust have been asked to lead the development of a Population Plan for the city which will deliver the new model in partnership with all those who make a contribution to health and social care. The Plan must be submitted by 22 June and Mr Iain Deboys, the Commissioning Lead, has now requested an opportunity for representatives of the LCG and the Trust to present initial proposals to the Council before then.
2.2	Given the light agenda and the timescale for the production of the plan, representatives of the Trust and the LCG are in attendance should the Committee wish to receive a brief presentation.
2.3	Members are also reminded that the representatives from Council on the Local Commissioning Group are Councillors Tim Attwood and Mervyn Jones hence the request to address this committee.

<b>3</b>	<b>Resource Implications</b>
	<u>Financial</u> None
	<u>Human Resources</u> None
	<u>Asset and Other Implications</u> No implications

<b>4</b>	<b>Equality and Good Relations Considerations</b>
4.1	There are no equality and Good Relations Considerations attached to this report

<b>5</b>	<b>Recommendations</b>
5.1	Members are asked to consider the request to brief the Committee on these proposals at the meeting.



### Belfast City Council

<b>Report to:</b>	Strategic Policy and Resources Committee
<b>Subject:</b>	Change of Dates of Meetings
<b>Date:</b>	8th June, 2012
<b>Reporting Officer:</b>	Mr Stephen McCrory, Democratic Services Manager (extension 6314)
<b>Contact Officer:</b>	Mr Jim Hanna, Senior Democratic Services Officer (extension 6313)

<b>1.0</b>	<b>Relevant Background Information</b>
1.1	Members will be aware that a schedule of meetings for the Standing Committees is produced at the commencement of the Calendar Year.
1.2	The two meetings of the Strategic Policy and Resources Committee are normally scheduled for the 1st and 3rd Friday of each month.
1.3	However, there have been occasions when the meetings have been rescheduled due to the workflow of the Committee or for other reasons.

<b>2.0</b>	<b>Key Issues</b>
2.1	<p>In order to assist the decision-making process and align with the work of the Area Working Groups and the voluntary Transition Committee, it is proposed that the Strategic Policy and Resources Committee meetings scheduled for August and November be put back 1 week and that the following timetable apply:</p> <p>Friday, 10th August at 10.00am (instead of 3rd August)</p> <p>Friday, 24th August at 10.00am (instead of 17th August)</p> <p>Friday, 9th November at 10.00am (instead of 2nd November)</p> <p>Friday, 23rd November at 10.00am (instead of 16th November)</p>

<b>3.0</b>	<b>Resource Implications</b>
	None

<b>4.0</b>	<b>Equality Implications</b>
	None

<b>5.0</b>	<b>Recommendations</b>
5.1	It is recommended that the Committee agrees to the revised schedule of meetings for August and November.

<b>6.0</b>	<b>Decision Tracking</b>
Officer responsible: Jim Hanna	



### Belfast City Council

<b>Report to:</b>	Strategic Policy and Resources Committee
<b>Subject:</b>	Requests for the use of the City Hall and the provision of Hospitality
<b>Date:</b>	Friday, 8th June, 2012
<b>Reporting Officer:</b>	Mr. Stephen McCrory, Democratic Services Manager (Ext. 6314)
<b>Contact Officer:</b>	Mr. Gareth Quinn, Senior Democratic Services Officer (Ext. 6316)

<b>1.</b>	<b>Relevant Background Information</b>
1.1	Members will recall that the Committee, at its meeting on 26th September, 2003, agreed to the criteria which would be used to assess requests from external organisations for the use of the City Hall and the provision of hospitality. Subsequently the Committee at its meeting on 7th August, 2009, further amended the criteria so as to incorporate the new Key Themes as identified in the Council's Corporate Plan.
<b>2.</b>	<b>Key Issues</b>
2.1	The revised criteria has been applied to each of the requests contained within the appendix and recommendations have been made to the Committee on this basis.
<b>3.</b>	<b>Resource Implications</b>
3.1	Provision has been made in the revenue estimates for hospitality.
<b>4.</b>	<b>Equality Implications</b>
4.1	N/A
<b>5.</b>	<b>Recommendations</b>
5.1	The Committee is asked to approve the recommendations as set out in the Appendix.

<b>6.</b>	<b>Decision Tracking</b>
Officer responsible – Gareth Quinn	
<b>7.</b>	<b>Key to Abbreviations</b>
Not applicable.	
<b>8.</b>	<b>Documents Attached</b>
Appendix 1 – Schedule of Applications	



Appendix 1

<b>Organisation/ Body</b>	<b>Event/Date - Number of Delegates/Guests</b>	<b>Request</b>	<b>Comments</b>	<b>Recommendation</b>
British Council	IAESTE Annual Conference 2013 Dinner  24th January, 2013  Approximately 250 attending	The use of the City Hall and the provision of hospitality in the form of a drinks reception	Delegates will be staying in accommodation in Belfast and the conference will take place within the city.  This event would contribute to the Council's Key Themes of 'City Leadership - strong, fair, together', 'Better opportunities for success across the city' and 'Better support for people and communities'.	The use of the City Hall and the provision of hospitality in the form of wine and soft drinks  Approximate cost £500
Rathbone	NEET (Not in Education or Employment Training) Awards  9th October, 2012  Approximately 100 attending	The use of the City Hall and the provision of hospitality in the form of tea, coffee and biscuits	This event aims to recognise and reward the achievements of young disadvantaged people from all communities who have undertaken training and education activities to help them with employment opportunities.  The event will also highlight the work of Rathbone in promoting strong, fair communities and the support provided to young people in seeking appropriate job skills and employment opportunities.  This event would contribute to the Council's Key Themes of 'City Leadership - strong, fair, together', 'Better opportunities for success across the city' and 'Better support for people and communities'.	The use of the City Hall and the provision of hospitality in the form of tea, coffee and biscuits  Approximate cost £250
Police Service of Northern Ireland	Policing with the Community Awards  12th October, 2012  Approximately 250 attending	The use of the City Hall and the provision of hospitality in the form of tea, coffee and biscuits	This event aims to recognise and reward the outstanding work which has taken place between the Police Service of Northern Ireland and communities and partners to help make Northern Ireland safe, while listening to the needs of the communities and helping to increase confidence in the Police Service.  This event would contribute to the Council's Key Themes of 'City leadership, strong, fair and together' and 'Better support for people and communities'.	The use of the City Hall and the provision of hospitality in the form of tea, coffee and biscuits  Approximate cost £500
Congo Support	Congolese	The use of the	This event aims to	The use of the City

Project	Evening  30th July, 2012  Approximately 70 attending	City Hall and the provision of hospitality in the form of tea, coffee and biscuits	<p>promote diversity by highlighting the positive contribution that the Congolese community can make to Belfast and contribute to a shared future in Northern Ireland.</p> <p>This event, which will also coincide with the anniversary of the Independence of the Democratic Republic of Congo, will showcase the history and culture of the Congolese people through poems, music, dance and songs.</p> <p>This event will conclude with the opportunity for open discussion between the different communities represented which will foster a shared understanding of the Congolese culture.</p> <p>This event would contribute to the Council's Key Themes of 'City Leadership - strong, fair, together' and 'Better support for people and communities'.</p>	Hall and the provision of hospitality in the form of tea, coffee and biscuits  Approximate cost £175
Ulster Bank Festival at Queens	Launch of Fifty years of Belfast Festival  4th September, 2012  Approximately 250 attending	The use of the City Hall and the provision of hospitality in the form of tea, coffee and biscuits	<p>This event will launch the Belfast Festival at Queens now in its 50th year.</p> <p>The Festival seeks to involve the community in appreciating cultures from across the world. It is a flagship event that provides focus for economic growth through the development of destination tourism, hospitality and the entertainment industry.</p> <p>The Festival aims to provide a strong, positive identity for Belfast, showing the world this is a mature, vibrant cultural capital and fostering a real sense of pride and ownership within communities at home.</p> <p>This event would contribute to the Council's Key Themes of 'City Leadership - strong, fair, together', 'Better support for people and communities' and 'Better opportunities for success across the city'.</p>	The use of the City Hall and the provision of hospitality in the form of tea, coffee and biscuits  Approximate cost £625
Concern Worldwide	Launch of Concern Worldwide's	The use of the City Hall and the provision of	This event will launch Concern Worldwide's 'Hunger Project' which	The use of the City Hall and the provision of

	<p>Hunger Project</p> <p>20th September, 2012</p> <p>Approximately 80 attending</p>	<p>hospitality in the form of a drinks reception</p>	<p>seeks to reposition the organisation around the issue of 'hunger' in developing countries through a public facing campaign that will help raise awareness of the organisation and the initiative.</p> <p>This event will also provide a platform for Concern Worldwide to say thank you to the people of Northern Ireland for their continued support.</p> <p>This event would contribute to the Council's Key Themes of 'City Leadership - strong, fair, together' and of 'Better support for people and communities'.</p>	<p>hospitality in the form of wine and soft drinks</p> <p>Approximate cost £400</p>
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**Belfast City Council**

<b>Report to:</b>	Strategic Policy and Resources Committee
<b>Subject:</b>	<b>Allowances for the Lord Mayor, Deputy Lord Mayor and High Sheriff</b>
<b>Date:</b>	8th June, 2012
<b>Reporting Officer:</b>	Stephen McCrory, Democratic Services Manager (ext 6314)
<b>Contact Officer:</b>	

<b>1</b>	<b>Relevant Background Information</b>
1.1	The Personal and Entertainments Allowances for the Lord Mayor, the Deputy Lord Mayor and the High Sheriff are normally reviewed annually.
1.2	The established practice had been that the Personal and Entertainments Allowances should take into account increases in the cost of living by increasing the allowances in line with the Consumer Price Index.
1.3	However, last year the Committee referred consideration of the matter to the Budget and Transformation Panel. That Panel had been provided with three options, which were to increase the allowances by a percentage equivalent to the Consumer Price Index as at 1st May (4.5%), increase the allowances by a percentage equivalent to the District Rate increase for that year (2.95%) or not to increase the allowances for the year. The Panel decided to recommend that the Committee should not increase the allowances for the 2011/12 year.
1.4	The Committee, at its meeting on 17th June, 2011, adopted the recommendation of the Budget and Transformation Panel and, accordingly, the Lord Mayor's Personal and Entertainments Allowances for that year were maintained at £34,800 and £25,900 respectively and the Deputy Lord Mayor's and the High Sheriff's Personal and Entertainments Allowances were maintained at £6,250 and £735 respectively.

<b>2</b>	<b>Key Issues</b>
2.1	The Committee is requested to consider if there should be a cost of living increase in the civic allowances for the 2012/13 year.

<b>3</b>	<b>Resource Implications</b>
3.1	Provision for a cost of living increase to the civic allowances has been made in the revenue budget.

<b>4</b>	<b>Equality and Good Relations Implications</b>
4.1	None.

<b>5</b>	<b>Recommendations</b>
5.1	<p>The Committee is requested to decide which of the following options should be adopted in relation to the allowances to be paid to the Lord Mayor, the Deputy Lord Mayor and the High Sheriff for the 2012/13 year:</p> <p><u>Option 1</u></p> <p>No increase in the civic allowances for the 2012/13 year.</p> <p><u>Option 2</u></p> <p>Increase the allowances by 3%, in line with the Consumer Price Index as at 1st April.</p> <p><u>Option 3</u></p> <p>Increase the allowances in line with the District Rate increase for the 2012/13 year at 2.6%.</p>

<b>6</b>	<b>Decision Tracking</b>
<p>Stephen McCrory, Democratic Services Manager</p> <p>3rd July, 2012</p>	



**Belfast City Council**

<b>Report to:</b>	Strategic Policy and Resources Committee
<b>Subject:</b>	<b>Request for Funding – Common Purpose Belfast</b>
<b>Date:</b>	8 June 2012
<b>Reporting Officer:</b>	Ronan Cregan, Director of Finance and Resources
<b>Contact Officer:</b>	Ronan Cregan, Director of Finance and Resources

<b>Relevant Background Information</b>	
	<p>The purpose of this report is to consider a request for £6,000 financial assistance from Common Purpose Belfast in connection with its 2012 Navigator programme for emerging leaders.</p> <p>Members should note that the council provided similar funding in 2011.</p> <p>Common Purpose programmes are designed to draw together local leaders, emerging leaders, and senior managers from all walks of life who could potentially play a role in shaping the future of Belfast. The council has supported Common Purpose Belfast since its inception in 1996.</p>

<b>Key Issues</b>	
	<p>Common Purpose Belfast has made a request to the council for £6,000 funding. The money will be used to offer three part funded places on their Navigator Programme for emerging leaders from non-profit organisations in Belfast. Last year council funded participants from UnLtd Belfast (a charity supporting social entrepreneurs), NI Cancer Fund for Children and EXTERN.</p> <p>The application is being made in the context of Section 37 of the Local Government Finance Act (Northern Ireland) 2011. The Committee is advised that the application meets the criteria for funding and that the level of funding requested is affordable.</p>

	<b>Recommendations</b>
	Members are asked to agree to the £6,000 funding to Common Purpose Belfast to be used to part-fund three participants on the Common Purpose Navigator Programme from non-profit organisations operating in Belfast

	<b>Documents Attached</b>





### Belfast City Council

<b>Report to:</b>	Strategic Policy and Resources Committee
<b>Subject:</b>	<b>Super-connected cities – business briefing event</b>
<b>Date:</b>	8 June 2012
<b>Reporting Officer:</b>	Ronan Cregan, Director of Finance & Resources
<b>Contact Officer:</b>	John McGrillen, Director of Development

<b>Purpose of Paper</b>	
1.1	The purpose of this report is to update Members on the council's bid for funding from the Urban Broadband Fund to make Belfast a super-connected city and to advise Members of a business briefing event that will take place in City Hall on Monday 11 June at 9:30am.

<b>Relevant Background Information</b>	
2.1	Members will recall at the Strategic Policy and Resources meeting on 20 January it was agreed the Council would lead on a bid to access money from the Government's Urban Broadband Fund (UBF).
2.2	As part of the proposals to access the funding, Belfast City Council submitted a bid to the Department of Culture, Media and Sport (DCMS) in February 2012 showing how we would use super-connected status to drive forward growth with particular focus on employment zones and city-wide high-speed mobile connectivity.
2.3	At this stage, the council has been guaranteed £6m to deliver the project but could receive up to £13.7m.
2.4	The task for us now is to turn our proposal that was submitted to DCMS in February into a detailed business case which must be submitted as part of our final bid for project funding before the deadline of 3 August.
2.5	The final award received by the council will be based on accurate costing of the agreed infrastructure investments and the project is expected to commence in Autumn 2012, following confirmation of the full funding award by DCMS in September.

<b>Key Issues</b>	

3.1	Under Super-Connected Belfast we aim to ensure access to broadband for every business and community across the city by 2015.
3.2	Whilst many areas of Belfast already have access to broadband with speeds of up to 24 Mbps (megabytes per second) this project will provide city wide access to speeds of up to 80Mbps (superfast broadband) and 100Mbps (ultrafast broadband).
3.3	The Super-connected Cities project will provide:
3.4	<ol style="list-style-type: none"> <li>1. 100% access to superfast broadband across the entire city.</li> <li>2. Targeted Ultra-fast broadband for those sectors that deploy large volumes of data, such as the creative industries.</li> <li>3. Wireless infrastructure across the city.</li> </ol>
3.4	Members are reminded that faster broadband will bring huge benefits to businesses and residents including:
	<p><b>Potential benefits for businesses:</b></p> <ul style="list-style-type: none"> <li>• increased productivity and competitiveness;</li> <li>• improved access to information and facilitation of innovation;</li> <li>• creation of platforms for business-to-business collaboration;</li> <li>• improved access to markets and opportunities worldwide;</li> <li>• development of the knowledge-based economy;</li> <li>• increased flexible working and reducing business travel and commuting;</li> <li>• improved access to education and training; and</li> <li>• provision of opportunities for businesses to become producers of ultrafast-enabled content and applications.</li> </ul> <p><b>Potential benefits for residents:</b></p> <ul style="list-style-type: none"> <li>• quicker and more reliable online transactions;</li> <li>• uninterrupted streaming of video and improved live television viewing;</li> <li>• free phone calls on the Internet;</li> <li>• improved access to education tools; and</li> <li>• improved home working connection.</li> </ul>
3.5	Education, profile-raising and demand stimulation is a vital part of the UBF programme and will be important in the assessment of our second stage proposal.
3.6	By August we need to have detailed and realistic plans demonstrating how demand stimulation and registration activities will generate greater demand by businesses and residences for ultrafast broadband services, aiming for 50% take-up across all sectors.
3.7	Our strategy for motivating and equipping business and communities with the desire and right skills to fully adopt broadband and use of ICT has a number of key elements including a significant targeted promotional campaign, a business support programme, a community support programme and a skills development programme covering business and public service users.
3.8	As part of our promotional campaign we will host a 'Super-connected Belfast business briefing' event in City Hall on Monday 11 June at 9:30am to which all

3.8	members are invited to attend.
3.9	The purpose of this event is to inform the business sector of our plans to roll out ultrafast broadband and wireless services across the city and what this means for their business. Speakers will include:
3.10	Arlene Foster, MLA Minister of Enterprise, Trade and Investment; Councillor Deirdre Hargey, Chair of Belfast City Council's Strategic Policy and Resources Committee. Sinclair Stockman, Digital NI 2020; and Colin Williams, Creative Director of local children's television production company, Sixteen South, will outline how access to faster broadband has impacted on how they do business.  A copy of the e-invite is attached in Appendix 1.

	<b>Resource Implications</b>
4.1	<u>Financial</u> There are no financial implications attached to this report.
4.2	<u>Human Resources</u> There are resource implications in terms of Council committing both officer and Member time in preparing our second stage submission and attending the business briefing event on Monday 11 June.

<b>5</b>	<b>Equality and Good Relations Considerations</b>
5.1	There are no Equality and Good Relations considerations attached to this report.

<b>6</b>	<b>Recommendations</b>
6.1	Members are requested to note the contents of this report.

<b>7</b>	<b>Decision Tracking</b>
There is no decision tracking attached to this report.	

<b>8</b>	<b>Documents Attached</b>
Appendix 1 – Invitation to attend a Super-connected Belfast business briefing.	

<b>9</b>	<b>Abbreviations</b>
DCMS - Department of Culture, Media and Sport UBF – Urban Broadband Fund	

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## Super-connected Belfast business briefing

**Date:** Monday 11 June  
**Venue:** Belfast City Hall  
**Time:** 9.45am – 10.45am (arrival 9.30am)

**Play your part to make Belfast an ultrafast broadband capital of Europe**

**Work smarter**      **Work faster**      **Connect globally**

Super-connected Belfast aims to improve availability, access and take-up of broadband and wireless services for every business and community in Belfast by 2015.

Come along to our business briefing and be the first to find out about our plans to roll out ultrafast broadband and wireless services across the city and what this means for your business.

### Speakers

Speakers include:

- **Artene Foster**, MLA Minister of Enterprise, Trade and Investment;
- **Sinclair Stockman**, Digital NI 2020; and
- **Councillor Deirdre Hargey**, Chair of Belfast City Council's Strategic Planning and Resources Committee.

And also:

**Colin Williams**, Creative Director of local children's television production company, S1teen South, will outline how access to faster broadband has impacted on how they do business.

### RSVP

Please RSVP to [superconnected@belfastcity.gov.uk](mailto:superconnected@belfastcity.gov.uk) or call Leah Thompson on 028 9027 0482 by **Wednesday 6 June**.

For more information, visit [www.belfastcity.gov.uk/superconnected](http://www.belfastcity.gov.uk/superconnected)



## An Investment Programme project

**#superbelfast**

[www.belfastcity.gov.uk/superconnected](http://www.belfastcity.gov.uk/superconnected)

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<b>Report to:</b>	Strategic Policy & Resources Committee
<b>Subject:</b>	<b>Tender for the Provision of Insurance Brokering Services</b>
<b>Date:</b>	8 June 2012
<b>Reporting Officer:</b>	Ronan Cregan, Director of Finance and Resources
<b>Contact Officer:</b>	Mark McBride, Head of Finance and Performance

<b>1</b>	<b>Relevant Background Information</b>
1.1	The primary role of the council's insurance brokering service is to obtain competitive quotations from a selection of financially stable insurers and to facilitate the purchase of the council's insurance policies. The broker also provides advice to the council on insurance matters generally.
1.2	The council's current insurance brokers, Willis Ltd, Ormeau Avenue, Belfast, were appointed on the 31 December 2007, following a competitive tender exercise, and the contract for this brokerage service is due to expire on the 31 December 2012.
<b>2</b>	<b>Key Issues</b>
2.1	Permission is being sought from Committee to retender the Insurance Brokerage Service. The contract awarded will be for a period of 3 years and the evaluation criteria will be based on both cost and quality.
2.2	If the tender action is approved by Committee, the contract will be awarded by the Director of Finance and Resources to the most economically advantageous tender under the Scheme of Delegation.
2.3	As the council is now required to use the "restricted" tender procedure for insurance services, the new contract will need to be awarded by the 31 October 2012. To facilitate this, the existing supplier has agreed to revise the expiry date of the existing contract from the 31 December 2012 to the 31 October 2012.

<b>3</b>	<b>Resource Implications</b>
3.1	The current cost of the brokerage service is £37,000 per annum and provision for the brokerage service is included within the 2012/13 revenue estimates.

<b>4</b>	<b>Recommendations</b>
4.1	The committee is asked to approve the commencement of a tender exercise for the provision of an insurance brokering service.

<b>5</b>	<b>Decision Tracker</b>
5.1	The Head of Finance and Performance will seek the appropriate tender award authority from the Director of Finance and Resources once the tendering exercise is complete



**Belfast City Council**

<b>Report to:</b>	Strategic Policy and Resources Committee
<b>Subject:</b>	Standing Order 55 – Employment of Relatives
<b>Date:</b>	8 June 2012
<b>Reporting Officer:</b>	Ronan Cregan, (Director of Finance and Resources, ext 6083)
<b>Contact Officer:</b>	Jill Minne, Head of Human Resources, ext 3220

**Relevant Background Information**

To inform the Committee of delegated authority exercised by the Director of Finance and Resources to the employment of individuals who are related to existing officers of the Council.

The Director of Finance and Resources has authorised the appointment of the following individuals who are related to existing officers of the Council in accordance with the authority delegated to him by the Policy and Resources (Personnel) Sub-Committee on 27 June 2005. The Committee is asked to note the appointments are authorised by the Director under Standing Order 55.

NAME OF NEW EMPLOYEE	POST APPOINTED TO	RELATIONSHIP TO EXISTING OFFICER	NAME OF EXISTING OFFICER	DEPARTMENT
Maria McManamon	Programme Support Asst. (PEACE III) ('Temporary Project' Post)	Partner	David Beard	Health & Env. Services
Daniel Marno	Park Ranger	Son	Gary Marno	Parks & Leisure

**Resource Implications**

Financial

Provision for this post exists within the revenue budgets of the relevant departments.

Human Resources

There are no Human Resource considerations. All appointments have been made on the basis of merit in accordance with the Council's Recruitment Policies.

Asset and Other Implications

There are no other implications.

**Recommendations**

Committee is asked to note the appointments authorised by the Director of Finance and Resources in accordance with Standing Order 55.

**Key to Abbreviations**

**Documents Attached**



**Belfast City Council**

<b>Report to:</b>	Strategic Policy and Resources Committee
<b>Subject:</b>	Corporate Investors in People (IIP)
<b>Date:</b>	8 June 2012
Reporting Officer:	Peter McNaney, Chief Executive
Contact Officer:	Jill Minne, Head of Human Resources

<b>1</b>	<b>Relevant Background Information</b>
	<p>The purpose of this report is to advise the Strategic Policy and Resources Committee that following a recent Council wide assessment, Belfast City Council has achieved Investors in People as an organisation.</p> <p>The Investors in People (IIP) framework has been a key element of the Council's Organisational Development work – we have used the framework to help build the capacity of the organisation through its people management in order that we are better placed to deliver Members' priorities.</p> <p>Two corporate mock assessments led by HR and an external assessor and supported by the council's internal reviewers were undertaken, the findings of which were translated into departmental improvement plans. A corporate HR and departmental HR partnership group was set up to ensure that the actions agreed in the plans were progressed.</p> <p>The Council applied for corporate IIP in April 2012 and an external assessment against the IIP framework was carried out during the week commencing 23<sup>rd</sup> April. Approximately 200 interviews were carried out with elected members, the Chief Executive, chief officers, managers, staff, trade union representatives and the corporate HR and departmental partnership group.</p>

<b>2</b>	<b>Key Issues</b>
	<p>Following an in depth assessment the assessors are satisfied that the council meets the requirements of the Investors in People National Standard and recommends that Belfast City Council be recognised as Investors in People organisation.</p> <p>The assessment report states that a total of 39 evidence requirements were</p>

assessed and met from the core standard and an additional 6 evidence requirements were assessed and met from the wider framework. A total of 45 evidence requirements altogether were met.

The following are some of the key issues highlighted from the feedback. (A full copy of the report can be made available to Members from the Human Resources Section upon request.)

- *The profile of Belfast is changing and Belfast City Council is at the centre of the excellent work which is being done to make the city one of the world's most popular venues.*
- *The Investment Programme represents an exciting challenge which will help transform the lives of ratepayers, visitors and those working in the City.*
- *To support the Investment Programme a comprehensive OD strategy is being implemented and there are clear signs of a change in culture and outlook amongst staff at all levels of the organisation.*
- *The Core Skills Programme makes excellent use of internal experience to expose colleagues' real life Council related learning. Participants acknowledge the CX's commitment to the programme, often conducting the opening session, setting the programme in context.*
- *Staff, generally are proud to work for the Belfast City Council and are rightly proud of the various events which have helped raise the profile of Belfast on the world wide stage.*
- *Generally Belfast City Council is regarded as a 'good employer' as endorsed not only by the service profile of personnel but also when relatively recently appointed staff compared it to their former employer.*
- *Need to continue to improve communications and management consistency.*
- *The excellent work that the organisation does in supporting learning and development is sometimes undone by a lack of systematic process to acknowledge people's successes.*
- *There were isolated examples of people management related issues which could be better communicated and managed.*

#### **Next steps**

As an Investor in People organisation we have demonstrated our strong commitment to the development and success of our people and a desire to continually improve and grow. It is a significant achievement and we wish to celebrate our success and share the credit with Council staff. HR will now work with Corporate Communications to plan an event to present the award and to undertake the relevant communications around our staff's achievement.

	A full analysis of the findings will be undertaken and action plans will be updated to keep the momentum going around our people improvement framework which is a key aspect of our Organisational Development work.
--	--

<b>3</b>	<b>Resource Implications</b>
	Any resource implications will be met from existing budgets

<b>4</b>	<b>Equality and Good Relations Implications</b>
	N/A

<b>5</b>	<b>Recommendations</b>
	<p>To note that Belfast City Council has been recognised as an Investors in People organisation.</p> <p>To recognise the contribution of the Council staff who worked to make this happen.</p> <p>To note that the work around our people improvement framework will continue as a key part of our Organisational Development work.</p> <p>To note we will fully communicate and publicise our success and arrange an event in the City Hall to facilitate the presentation of the award.</p>

<b>6</b>	<b>Decision Tracking</b>

<b>7</b>	<b>Documents Attached</b>

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**Belfast City Council**

<b>Report to:</b>	Strategic Policy & Resources Committee
<b>Subject</b>	Smithfield Market Units Update
<b>Date:</b>	8 June 2012
<b>Reporting Officers:</b>	Gerry Millar, Director of Property & Projects, ext 6217
<b>Contact Officers:</b>	Pamela Davison, Estates Surveyor, ext 3506

<b>1</b>	<b>Relevant Background Information</b>
	<p>The Director of Property &amp; Projects is responsible for reporting to the Strategic Policy &amp; Resources Committee the terms of any lease and tenancy agreement at St George's and Smithfield Markets.</p> <p>The "In Shops" in the Hi Park Centre in High Street is closing at the end of June and an existing trader there has contacted Belfast City Council to relocate their business to Smithfield Market to ensure business continuity.</p>

<b>2</b>	<b>Key Issues</b>
	<p>The committee is asked to note the letting of Unit 35 in Smithfield Market agreed under the delegated authority of the Director of Property &amp; Projects</p> <p>Tenant:           Unit 35                                Smithfield Market                                Jiani Li                                6 Irwin Crescent                                Belfast                                BT4 3AQ</p> <p>Unit Size – 306.33 sqft      Terms - £500 per month</p> <p>Tenancy agreement for six months and monthly thereafter commencing 8<sup>th</sup> June 2011.      The unit will be used a bead shop and for jewellery making classes.</p> <p>Unit 2 Smithfield Market      Committee noted the letting of the above unit to Desmond McKenna and Ibrahim Salam at its meeting on 23<sup>rd</sup> September 2011. Members are advised</p>

	that Mr Salam is now the sole trade from this unit and the tenancy agreement has been revised accordingly.
--	--

<b>3</b>	<b>Resource Implications</b>
	<b><u>Asset &amp; Other Implications</u></b> Letting of Unit 35 Smithfield Market at a rental of £6000 per annum

<b>4</b>	<b>Equality &amp; Good Relations Considerations</b>
	None.

<b>5</b>	<b>Recommendations</b>
	To note the terms of the lettings, set out above.

<b>6</b>	<b>Decision Tracking</b>
	Estates to Complete Tenancy Agreements: June 2012 Management Unit.

<b>7</b>	<b>Key to Abbreviations</b>
	n/a

<b>8</b>	<b>Documents Attached</b>
	No documents attached.



## Belfast City Council

<b>Report to:</b>	Strategic Policy & Resources Committee
<b>Subject:</b>	<b>Forum for Alternative Belfast, 2012 Summer School</b>
<b>Date:</b>	8 June 2012
<b>Reporting Officer:</b>	Gerry Millar, Director of Property & Projects, ext 3526
<b>Contact Officer:</b>	George Wright, Head of Facilities Management, ext 6232/5206

### Relevant Background Information

A request has been received from the Forum for Alternate Belfast to hold a Summer School in the City Hall from Monday 13 to Friday 17 August 2012.

Forum for Alternative Belfast is a not-for-profit organisation that campaigns for a better and more equitable built environment in Belfast. The forum was formally launched on the 4 June 2009 by a group of architects, planners and others who came together to explore the alternative ways that the city might be developed.

The Forum has held three successful summer schools in recent years. In August 2009 the outcome of the school was the 'Missing City' map starkly showing the empty land in the centre of Belfast. A number of 'what if' scenarios outlined how this space could be put to use.

The following year the week concentrated on the inner city centre with the outcome the 'Six Links' showing how north Belfast could be connected again to the city centre and highlighting the underlying dangers of the York Street Interchange for the city unless it designed it in the correct manner.

Last year the school concentrated on South Belfast and a long standing plan of the Road Service to build a road potentially severing South Belfast from the city centre. The result of the week was 'Streets not Roads' demonstrating how a tree lined pedestrian/cycle friendly street faced with buildings could provide a solution.

In the autumn of 2011 both the East and West Belfast Partnership Boards had discussions with the Forum about the 2012 summer school. It was agreed that the school would look at both East and West Belfast and their connections to the city centre. The study area reaches as far as Templemore Avenue in the east and Dunville Park in the west.

Because of the subject matter and Belfast City Council's relationship with the Partnership Boards the Forum wishes to have the summer school in the City Hall. Last year because of the subject matter the school was held in QUB.

**Key Issues**

The main discussions and workshops will take place between 9am and 5pm each day however to ensure local and community involvements feedback sessions will be arranged on the Tuesday and Wednesday evening. There will also be a public presentation after 4pm on the Friday to give the weeks findings.

Key to the summer schools success is the involvement of all the key government departments, Belfast City Council, other non government agencies and representatives from local neighbourhoods. Professionals and students from the fields of architecture, and planning will also be in attendance.

The organisers wish to use the Reception Hall for the main study sessions and the evening presentations. Some break out areas might be required for discussion groups. The organisers would also like to use part of the marble ground floor space as an exhibition area to give the summer school a public interface.

The anticipated numbers attending each day will be in the region of 30-40. In addition to the use of accommodation the organisers are also asking Belfast City Council to provide some light hospitality in the way of tea, coffee and biscuits each day.

Space is available in the City Hall during this time of the year which is relatively quiet for functions.

**Resource Implications**

The financial resource implications would largely be limited to the provision of light refreshments for this group. There are no asset-related implications.

**Decision (s) required**

It is recommended that the committee approve the requests from the Forum for Alternative Belfast to hold a summer school in the City Hall.

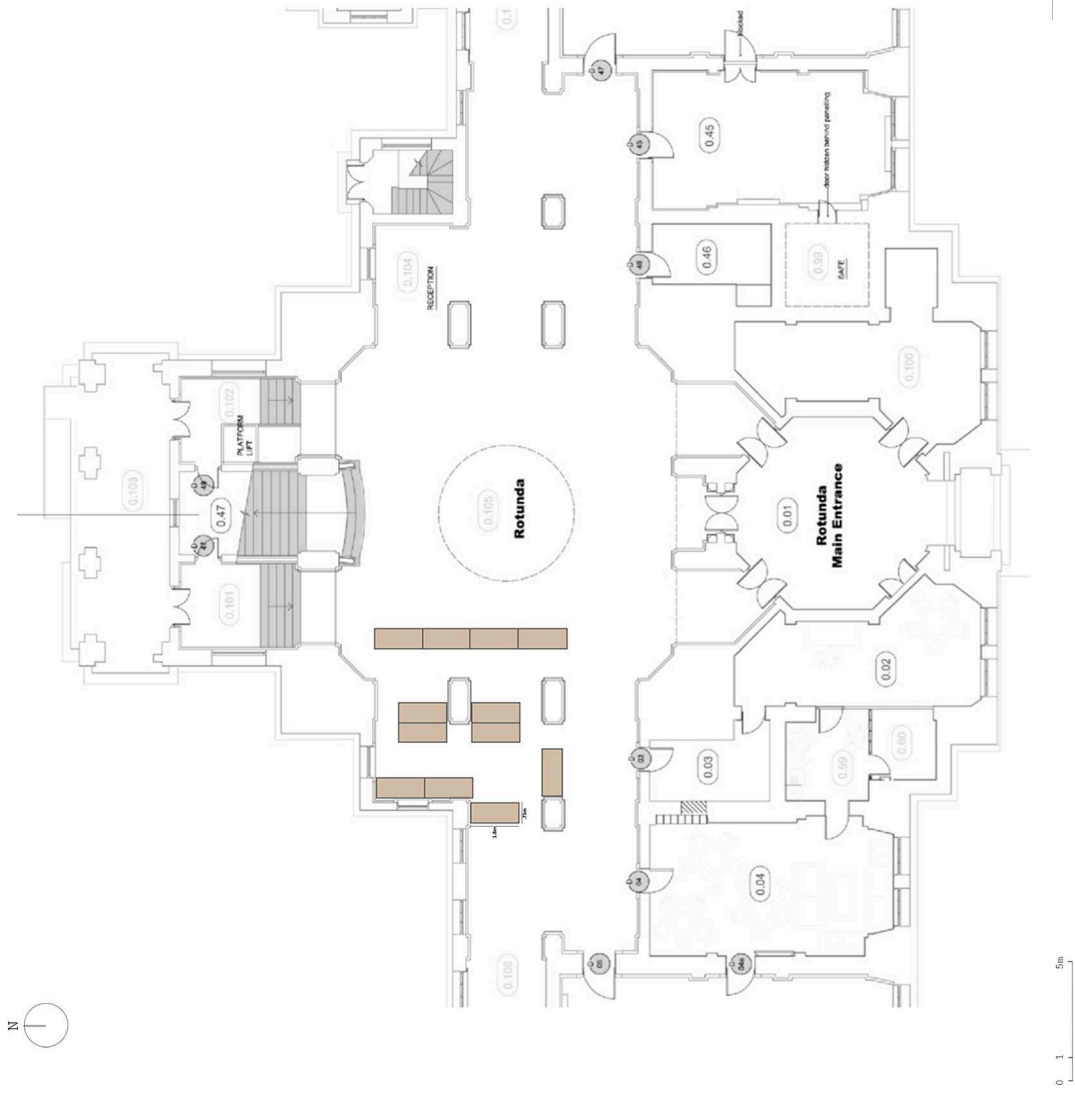
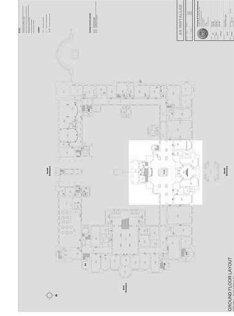
**Key to Abbreviations**

None.

**Documents Attached**

Appendix – map of proposed layout.





Proposed Layout for Summer School 2012  
 Wednesday 23rd May 2012

FORUM for alternative Belfast

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### Belfast City Council

<b>Report to:</b>	Strategic Policy & Resources Committee
<b>Subject:</b>	<b>Passchendaele Commemoration Event</b>
<b>Date:</b>	8 June 2012
<b>Reporting Officer:</b>	G Millar, Director of Property & Projects, ext 3526
<b>Contact Officer:</b>	George Wright, Head of Facilities Management, ext 6232/5206

#### Relevant Background Information

A request has been received from the Laganvillage Somme Society seeking permission to organise a short Lambeg drum and fife whistle demonstration following a wreath-laying event at the City Hall on Saturday 28 July 2012.

The wreath-laying service to commemorate the battle of Passchendaele has been taking place at the Cenotaph for a number of years. This service, which normally takes place on the last Saturday of July, commemorates the role played by the 36<sup>th</sup> Ulster Division and the 16<sup>th</sup> Irish at Passchendaele.

The Passchendaele battle was one of the bloodiest of the 1<sup>st</sup> World War; it lasted from 31st July to the 7th November 1916 and thousands of people from regiments across the world lost their lives.

This year, following on from the wreath-laying ceremony, the organisers would also wish to organize a short concert-type demonstration on the front lawns. The concert is aimed mainly at local and tourist visitors who in the past have commented about the colour and pageantry of the wreath-laying event.

#### Key Issues

The Lambeg drum and fife whistle demonstration would last about 30 minutes from 11.00am to 11.30am. A number of old traditional military tunes would be played and leaflets giving information about Passchendaele would be available on request.

Approximately 200 people normally take part in the wreath-laying ceremony, and the number of other visitors present will vary depending on the weather.

No formal set-ups are required as the demonstration is done from a standing position and no specific parts of the lawns need to be cordoned off. The organisers will also provide their own staff to steward the event.

The City Events Unit has been contacted and has confirmed that, although the Olympic Games commence on the 27<sup>th</sup> July 2012, nothing specific has been planned around the Big Screen on the 28<sup>th</sup> July.

The PSNI are also aware of the proposed event and the Laganvillage Somme Society may be contacting the Parades Commission to seek approval for a possible parade to and from the City Hall.

**Resource Implications**

There are no additional security or other costs associated with this event, and no access is required to the main building.

**Decision (s) required**

The committee is asked to consider and agree the request from the Laganvillage Somme Society to have a short Lambeg Drum and Fyfe Whistle demonstration in the grounds of the City Hall on the 28<sup>th</sup> July 2012.

**Key to Abbreviations**

None

**Documents Attached**

None



**Belfast City Council**

<b>Report to:</b>	Strategic Policy and Resources Committee
<b>Subject:</b>	Developing Belfast as an Age Friendly City
<b>Date:</b>	1 <sup>st</sup> June 2012
<b>Reporting Officer:</b>	Damien Connolly, Environmental Health Manager, Environmental Health Service, Ext 3361
<b>Contact Officer:</b>	Adele Faulkner, Environmental Health ext 3607

<b>1</b>	<b>Relevant Background Information</b>
1.1	The Council has identified older people as a key priority under its theme of “Better support for people and communities”.
1.2	In Belfast 19.65% of the population is currently over 60 and it is estimated that by 2030 25% of people in Belfast will be over 65 years of age. As a city we must plan for an ageing society and adopt our structures and services to be accessible to and inclusive of older people with their varying needs and capabilities.
1.3	The World Health Organisation (WHO) has established a global Network of Age Friendly Cities that encourage active ageing by optimising opportunities for health, participation and security in order to enhance quality of life as people grow older. The WHO has produced a guide and checklist to help cities assess themselves from the perspective of older people and identify how they can become more age friendly. If a city meets this list of criteria and makes an application to the WHO it can be awarded “Age Friendly” status.
1.4	Belfast Strategic Partnership (BSP) through its “Framework For Action to address life inequalities 2011- 2015” highlights the opportunity to achieve an age friendly city and improve healthy and active aging. It also recognises the role of the Healthy Aging Strategic Partnership (HASP) to lead on a joined up approach to plan and deliver services for older people. HASP will form part of the mechanism for this delivery, support posts for the partnership are part funded by the Council.
1.5	On 23rd March the Strategic Policy and Resources Committee agreed that the Council should sign the “Age Friendly Declaration”, the first formal step in the process towards Belfast becoming an Age Friendly City. This decision was ratified by Council on the 2 <sup>nd</sup> April 2012. The Lord Mayor signed the Declaration at the Senior Citizens Convention in the City Hall on the 15 <sup>th</sup> May. The Declaration commits Belfast to participate in the WHO Global Network of Age-friendly cities and commence a 5 year cycle of continuous assessment and improvement to make Belfast more age friendly.
1.6	Under the direction of the Older Peoples All Party Reference Group, an initial baseline study was commissioned to establish how age friendly Belfast currently is and what needs

	<p>to be done to enable Belfast to make an application to WHO for Age Friendly Status. The baseline assessment was made against the 8 WHO age friendly criteria and was made from the perspective of the 103 older people (from the seniors forums) who participated in the consultation event held in Belfast Castle in early March. This study is now complete and the report is attached in Appendix 1.</p> <p>The initial study identified the main priority areas for improvement in the city for older persons to be:</p> <ol style="list-style-type: none"> <li>1. Community and health services, followed by</li> <li>2. Transportation, and</li> <li>3. Housing.</li> </ol> <p>The report also provides information on the aspects of each criterion that older people think are done well or need to be improved. Given the successful feedback from the Older people conference in City hall on the 15<sup>th</sup> May there was further views and ideas expressed which will be fed into the initial study. Further, it recommends how Belfast City Council should use this information and the steps to be taken to create an Age Friendly City.</p>
--	--

<b>2</b>	<b>Key Issues</b>
2.1	Belfast City Council has committed to participate in the WHO Global Network of Age-friendly cities and commence a 5 year cycle of continuous assessment and improvement to make Belfast a more age friendly city.
2.2	The baseline study of “Belfast as an Age Friendly City” (Appendix 1) recommends the following next steps:
2.3	<p><u>Develop Consultation Methods</u></p> <p>More extensive consultation is required to develop the baseline further and seek the views of those who may not be represented through the existing senior’s forums. These are likely to include groups such as carers, care and nursing homes and men who may be particularly isolated.</p>
2.4	<p><u>Produce a detailed technical report and action plan</u></p> <p>A second more detailed technical report will have to be developed following wider consultation and review of data and literature. This will enable BSP to agree a 3 year action plan and identify indicators which can be submitted to WHO for review and endorsement.</p>
2.5	<p><u>Establish an annual Age Friendly Summit</u></p> <p>Following the award of Age Friendly Status BSP should hold an annual age Friendly summit which should build on and replace the current Annual Senior Citizens Conventions.</p>
2.6	<p><u>Establish an Age Friendly Steering Group and governance arrangements</u></p> <p>In order to develop an age friendly city the different sectors and organisations across the city, including the voluntary sector and those representing older people, must plan and work together. Belfast Strategic Partnership, incorporating the Healthy Ageing Strategic Partnership could deliver such a collaborative approach as it is a key area of work within its Framework for Action. HASP are supportive of this approach and will make a proposal to BSP on Governance arrangements on the agreement of this Committee.</p> <p>Updates on progress will be provided to the Strategic Policy and Resources committee via the older people All Party Reference Group.</p>

<b>3</b>	<b>Resource Implications</b>
3.1	It is anticipated that Belfast City Council's contribution will be delivered within existing budget estimates. Staff from Belfast Health Development Unit, and HASP which is part funded by council, will support this project. Money from the older people's thematic budget may be used to organise events and carryout further research etc. BSP will be asked through the paper from HASP to provide additional staff and financial support as necessary.

<b>4</b>	<b>Recommendations</b>
4.1	<p>The Committee is asked to:</p> <p>(i) Consider the attached report (Appendix 1) on the baseline study of "Belfast as an Age Friendly City" and agree the next steps towards Belfast being recognised by the WHO as an "Age Friendly City"; and</p> <p>(ii) Agree that the Belfast Strategic Partnership should provide the Governing Structure for the Age Friendly Approach and support HASP in a collaborative approach to deliver Belfast as an Age Friendly City.</p>

<b>Key to Abbreviations</b>
<p>BSP – Belfast Strategic Partnership          HASP – Healthy Ageing Strategic Partnership          WHO – World Health Organisation</p>

<b>Documents Attached</b>
Appendix 1 - Age Friendly Initial Baseline Report

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### Belfast City Council

<b>Report to:</b>	Strategic Policy & Resources Committee
<b>Subject:</b>	<b>CONSULTATION – BELFAST HEALTH &amp; SOCIAL CARE TRUST: A CONSULTATION PROPOSAL TO RESHAPE MATERNITY SERVICES IN BELFAST</b>
<b>Date:</b>	Friday 8 <sup>th</sup> June 2012
<b>Reporting Officer:</b>	Suzanne Wylie, Director of Health & Environmental Services
<b>Contact Officer:</b>	Geoff Dickson, Policy & Performance Analyst

#### Purpose

To bring to the attention of the Strategic Policy & Resources Committee, details of a consultation document by the Belfast Health and Social Care Trust (the Trust) on its proposal to reorganise the Maternity Care in the Belfast Health & Social Care Trust and to agree either a Council response or that individual party groups respond to the consultation separately.

#### Relevant Background Information

##### Summary of Consultation Document

The Council received a consultation document (Appendix 1) from The Trust outlining proposed changes to the provision of maternity services in Belfast. In the consultation document, five options were initially considered by The Trust for the reshaping of maternity services. These were subsequently reduced to three for more detailed examination. This extract from the consultation document summarises these options:

**Option 1** Maintain Consultant-led Obstetric services at the Royal Jubilee Maternity Service and Mater Hospital, including current models of Midwife-Led Care in both Units (this is the status-quo);

**Option 2** Establish one Consultant-led Obstetric service and an Alongside Midwife-Led Unit at the Royal Jubilee Maternity Service only;

**Option 3** Establish one Consultant-led Obstetric Service, including current models of midwife-led care, at the Royal Jubilee Maternity Service and a Free-standing Midwife-Led Unit at the Mater Hospital.

In the document, the Belfast Health and Social Care Trust recommend that Option 3 is taken forward. This will establish one Consultant-led Obstetric Service, including current models of midwife-led care, at the Royal Jubilee Maternity Service and a free-standing Midwife-Led Unit at the Mater Hospital. The Trust states that Option 3 is the preferred option for the Belfast Maternity Service because it will:

- Give women greater choice in their options for maternity care, with the change to a Free-standing Midwife-Led Unit at the Mater Hospital;
- Improve safety for all women by bringing together the Labour Ward consultant obstetric presence in one unit;
- Maintain the existing clinical linkages to other regional services on the Royal Hospital site, including the Regional Neonatal Unit and The Children's Hospital;
- Offers the necessary physical capacity to accommodate one consultant-led obstetric service

in the Royal Jubilee Maternity Service;

- Locate a free-standing Midwife-Led Unit at the Mater, where the necessary physical capacity exists;
- Significantly improve training and supervision of junior doctors as a consequence of single site consultant-led care;
- Align with the strategic direction set by the Belfast Health and Social Care Trust and the Health and Social Care Board/Public Health Agency.

### **Belfast Trust Open Presentation to Committee**

On 21 May 2012 all Councillors were invited to a presentation from the Belfast Trust to outline the consultation document and ask questions they may have on the proposals to the officers from The Trust who were present. Following the presentation, Members asked a number of questions which were answered by the Trust, as follows:

#### ***Are these proposals about saving money? Has there been feedback from the trade unions? What is the latest position on a specialist children & women unit?***

Councillors were assured that the proposals were not about saving money, but rather improving quality and safety. There may be some value for money savings, particularly in a reduction in locum doctors being used, but it is not the driver.

With reference to trade union feedback, it was outlined that the proposals do not cut staff numbers. Trade unions have been consulted and some are opposed as they feel it lessens the service provision in north Belfast. Others (for example the Royal College of Nurses) are in favour of the proposals.

Councillors were informed that regarding a specialist women & children unit, it is hoped that 3 floors of a new building in the Royal Hospital will be dedicated to women and children.

#### ***Can we be assured that serious considerations will be given to any feedback received from the Council?***

Councillors were assured that the opinions of locally elected politicians were very important in the consultation process and they will be given serious consideration. It was stated that previous consultation responses to the Trust have resulted in changes to proposals.

#### ***Option 3 seems to reduce choice for people in Belfast. Will you ensure people are well informed about the choices available to them?***

The Maternity Charter was referred to which outlines the rights and choices available to patients; it was explained how this Charter was given to all patients and enabled them to make fully informed decisions.

#### ***Are there any indicative costs for Option 3?***

It was stated that while there were no additional revenue costs, there would be small capital costs for minor refurbishments.

Following this discussion, Members present expressed no concerns with The Trust's recommended option.

### **Summary of UNISON response**

Following the presentation to Committee, the Council received correspondence from UNISON that they were opposing Option 3 and instead supporting Option 1. They asked that all Councillors be given the opportunity to read their consultation response (Appendix 2) and subsequently it was emailed to all Councillors. In their submission, UNISON give their support for Option 1 with the

following reasons:

- It best meets the needs of women and their partners
- It protects local accessible maternity provision for women
- It keeps all options and choices available
- The other Trust proposals put the long term viability of the Mater under threat
- Consultant care, for those who need it, available on both sites is the best option
- It is the option supported by midwives at the Mater Hospital
- The new maternity hospital at the Royal is years from completion
- The Royal is currently under special measures
- There is no need to take this decision until the new maternity hospital is open

### **Consultation Response**

The closing date for feedback to the consultation paper is 31<sup>st</sup> May. However, given the presentation to Councillors on 21<sup>st</sup> May, the Trust agreed to accept a response from the Council up to the 11<sup>th</sup> June.

### **Recommendations**

Members are asked to either endorse one of the 3 proposed options or refer to individual Party Groups for individual consideration. Officers will subsequently write to The Trust informing them of the Council position.

### **Documents Attached**

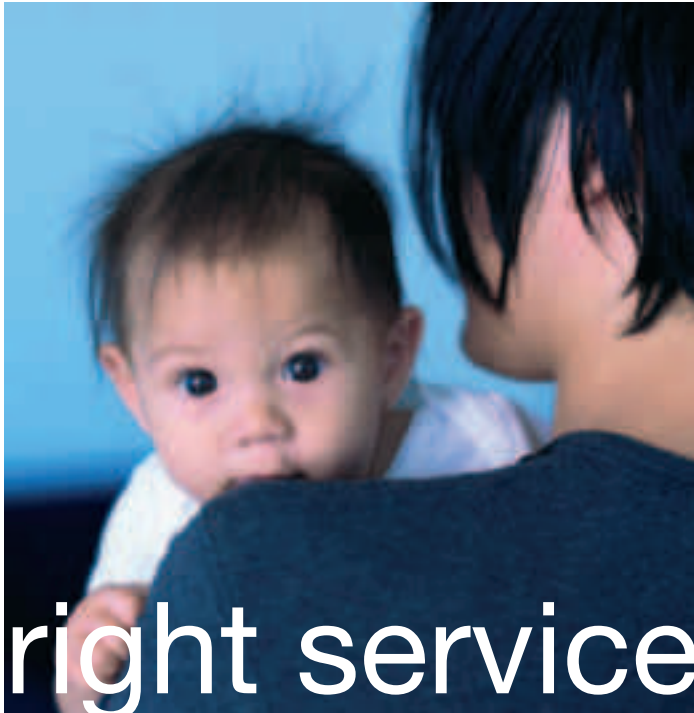
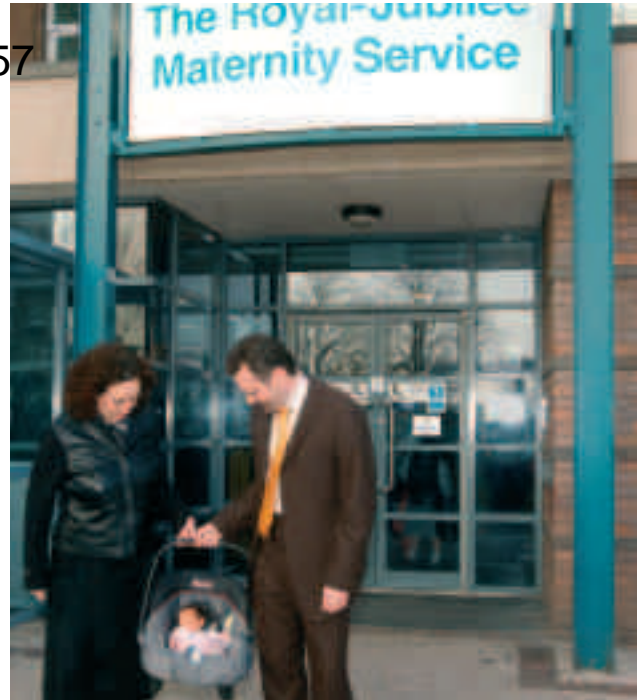
Appendix 1 – Belfast Health & Social Care Trust consultation document

Appendix 2 – UNISON response to the Belfast Health & Social Care Trust consultation document.

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Belfast Health and  
Social Care Trust



right service

for women and their partners



right place



A consultation proposal  
to reshape  
Maternity Services  
in Belfast

1 March 2012 to 31 May 2012





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## Availability in other formats

Throughout this paper you will find an explanation for some of the technical terms used. If there is something in the document that you do not understand, please feel free to contact the Trust.

If you have any queries about this document and its availability in alternate formats then please contact:

Orla Barron  
Health and Social Inequalities Manager  
1<sup>st</sup> Floor, Graham House  
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Tel 028 9096 0069  
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## Foreword

Brian Barry, Director of Specialist Hospitals, Women and Child Health

### RIGHT SERVICE, RIGHT PLACE FOR WOMEN AND THEIR PARTNERS

We have produced this document to ensure that women, their partners and families, staff and the public have an opportunity to consider and comment on the proposed reshaping of maternity services in Belfast. Our aim is to ensure our maternity services are of the highest possible quality, are responsive to the needs of women and their partners and offer informed choice whilst improving the user experience. Any changes we make will only happen after we have listened to everyone's views. That is why we would encourage you to contribute to our plans. Your opinion matters to us.

In 2008 in our New Directions consultation document, we opened a conversation on the best way to deliver services in Belfast over the next decade. This document is part of the next steps. It represents a formal consultation on specific proposals for service change in the delivery of maternity services. Our priority is, and will remain, the safety of women throughout all the stages of their journey. Our focus here is on the where, rather than the how, women will deliver their babies.

We are proposing that consultant-led obstetric services should be provided at the Royal Jubilee Maternity Service, alongside the existing models of midwife-led care, and that a free-standing Midwife-Led Unit should be developed at the Mater Hospital. Antenatal care would continue to be delivered in its current locally accessible arrangement, in the community and in the Mater Hospital and Royal Hospital sites.

We want to do all of this to ensure women, their babies and their families have the best maternity experience possible, delivered by the right person, in the right place, at the right time.

First, we want to listen to you. We hope you will take the time to read this document and let us know your views on the proposals. Help us to get it right.

[http://intranet.belfasttrust.local/Corporate Documents/New\\_Directions\\_Final.pdf](http://intranet.belfasttrust.local/Corporate Documents/New_Directions_Final.pdf)





**An Alongside Midwifery Unit** is a unit offering care to women with straightforward pregnancies in which midwives are the professional responsible for care.

Medical services including obstetric, neonatal and anaesthetic care are immediately available on the same site.

**Obstetrics** is the branch of medicine that trains doctors to help pregnant women with pregnancy care and delivery of their babies especially when there are complex health needs.

The Obstetric team works closely with GPs and primary care professionals across the region.

**A Freestanding Midwifery Unit** is a unit offering care to women with straightforward pregnancies in which midwives are the professional responsible for care.

General Practitioners may also be involved in antenatal and postnatal care. Medical services including obstetric, neonatal and anaesthetic care are not immediately available on the same site. Transfer may involve a car or ambulance journey.

## Executive Summary

Choosing where, and how, to give birth is an important decision for mothers-to-be. The Belfast Health and Social Care Trust is committed to ensuring that all women have their birthing experience in an environment which is staffed to meet their needs, with appropriate clinical linkages for delivery and access to postnatal and neonatal care as required. The Trust also wants to offer women the possibility of using a midwife-led unit which would enhance their choice in where they can deliver their babies. This would support the current models of midwife-led care.

Five options were initially considered for the reshaping of Maternity Services and these were reduced to three for more detailed examination:

**Option 1 Maintain** Consultant-led Obstetric services at the Royal Jubilee Maternity Service and Mater Hospital, including current models of **Midwife-Led Care** in both Units (this is the status-quo);

**Option 2 Establish** one Consultant-led Obstetric service and an **Alongside Midwife-Led Unit** at the Royal Jubilee Maternity Service only;

**Option 3 Establish** one Consultant-led Obstetric Service, including current models of midwife-led care, at the Royal Jubilee Maternity Service and a **Free-standing Midwife-Led Unit** at the Mater Hospital.

## Service Recommendation

The Belfast Trust Maternity Project Group<sup>1</sup> recommendation is that:

The Belfast Health and Social Care Trust should take forward Option 3 which will establish one Consultant-led Obstetric Service, including current models of midwife-led care, at the Royal Jubilee Maternity Service and a free-standing Midwife-Led Unit at the Mater Hospital.

Option 3 is the preferred option for the Belfast Maternity Service because it will:

- Give women greater choice in their options for maternity care, with the change to a Free-standing Midwife-Led Unit at the Mater Hospital;
- Improve safety for all women by bringing together the Labour Ward consultant obstetric presence in one unit;
- Maintain the existing clinical linkages to other regional services on the Royal Hospital site, including the Regional Neonatal Unit and The Children's Hospital;
- Offers the necessary physical capacity to accommodate one consultant-led obstetric service in the Royal Jubilee Maternity Service;
- Locate a free-standing Midwife-Led Unit at the Mater, where the necessary physical capacity exists;
- Significantly improve training and supervision of junior doctors as a consequence of single site consultant-led care;
- Align with the strategic direction set by the Belfast Health and Social Care Trust and the Health and Social Care Board/Public Health Agency.

## Introduction

2.1 The development of the Belfast Trust and recent reviews of maternity services<sup>2</sup> have provided the obstetricians, midwives and other relevant staff with the opportunity to reshape maternity services. The purpose is to ensure that women, their partners and their babies experience a quality service which offers maximum safety and choice in their location and type of maternity service.

2.2 The Trust, in its public consultation on New Directions<sup>3</sup>, received support for its key principles to ensure that all women who give birth in the Belfast Trust, have an experience which gives them:

- choice in how and where to give birth;
- continuity of care during childbirth; and
- control in their maternity care, based on high quality information and evidence based clinical advice.

New Directions indicated that the Trust's proposed model for Maternity Services is to locate inpatient obstetric services, including neonatal services, in the Royal Jubilee Maternity Service at the Royal Maternity Hospital complemented by the provision of a Midwife-Led Unit at the Mater Hospital. It was also proposed that antenatal care would continue to be provided in its current locally accessible arrangement. Postnatal care would continue to be provided in the home following appropriate discharge.

Community midwife teams would continue to provide ongoing assessment, monitoring and support of mothers and babies.

2.3 The Belfast Trust made a commitment to consult on proposals once these had been further developed. This document is that next step and details why the Belfast Trust is convinced that there is a need to make proposals for change to the way maternity services currently operate. The Trust is confident that its proposal will result in an enhanced level of care for women with high-risk pregnancies whilst ensuring that women with straightforward pregnancies have the choice to continue to access locally available services.

Neonatal care is the care of the newborn. Neonatal units specialise in the care of babies born early with low birth weight or babies who have a medical condition that requires specialised treatment.

Postnatal Care is the care of the mother and baby immediately following birth and up to 6 weeks after.

Antenatal care is the midwifery and medical supervision given to a pregnant woman and her baby from conception to the delivery of the baby with the aim of prompt detection and treatment of problems.

2 RQIA: Report on the RQIA Review of Intrapartum Care March 2010 [http://www.rqia.org.uk/cms\\_resources/Southern%20Report%20Published%20Version%2011%20May%2010.pdf](http://www.rqia.org.uk/cms_resources/Southern%20Report%20Published%20Version%2011%20May%2010.pdf)

3 New Directions – a conversation on the future delivery of health and social care services in Belfast – Belfast Health and Social Care Trust, 2008.

### 3.0 How are Maternity Services currently delivered?

- 3.1 Around 26,000 babies are born each year across Northern Ireland, almost all within eleven Units. Within the last decade, five maternity services have developed Midwife-led Units, three of which have an Alongside Midwife-Led Unit<sup>4</sup> and a further two are Freestanding Midwife Led Units<sup>5</sup>. The Belfast Maternity service includes the Royal Jubilee Maternity Service and the Mater Maternity Unit, both of which offer consultant and midwife-led care.



Figure 3.0 Location of Maternity Units in Northern Ireland

#### Figure 1.0 Location of Maternity Units in Northern Ireland

- 3.2 The Royal Jubilee Maternity Service delivers over 20% of babies in Northern Ireland and is the regional referral centre for high risk and complicated pregnancies. The Regional Neonatal Unit is based alongside the Royal Jubilee Maternity Service and both are located close to the Children's Hospital on the Royal Hospitals site. The regional nature of the Royal Jubilee Maternity Service is highlighted in Table 1, which shows the Trust of Residence for mothers in 2011, with births to women from across all 5 Trusts.

<sup>4</sup> An **Alongside Midwifery Unit** is a unit offering care to women with straightforward pregnancies in which midwives are the professional responsible for care. Medical services including obstetric, neonatal and anaesthetic care **are immediately available on the same site**.

<sup>5</sup> A **Freestanding Midwifery Unit** is a unit offering care to women with straightforward pregnancies in which midwives are the professional responsible for care. General Practitioners may also be involved in antenatal and postnatal care. Medical services including obstetric, neonatal and anaesthetic care **are not immediately available on the same site**. Transfer may involve a car or ambulance journey.



Table 1: Births in Royal Jubilee Maternity Service by Trust Residence

RJMS births by Trust residence	No of births 2011	Percentage*	Belfast as Trust of Residence		
			Area	No of births	Percentage*
Belfast Trust	2689	48%			
South Eastern Trust	1420	25%	North	497	18%
Northern Trust	1187	21%	South	749	28%
Southern Trust	234	5%	East	269	10%
Western Trust	64	1%	West	892	33%
Great Britain/Republic Of Ireland	8	-	Castlereagh	222	11%
TOTAL	5602	100%	TOTAL	2689	100%

3.3 As the regional centre, the Royal Jubilee Maternity Service has close physical and clinical links with the:

- Specialist neonatology teams from the Regional Neonatal Unit;
- Specialist paediatric support from the Children's Hospital;
- Specialist clinics for women with cardiology, haematology, endocrinology, neurology and other sub-specialty services on the Royal Victoria Hospital site.

3.4 The Mater Maternity Unit (MMU) in the Belfast Trust delivers 5% of total births in Northern Ireland, and provides a locally accessible service with 92% of their births to women from North and West Belfast and the Northern Trust, particularly from the Newtownabbey and Glengormley areas, as shown in Table 2.

Table 2: Births in Mater Maternity Unit by Trust Residence

MMS births by Trust residence	No of births 2011	Percentage*	Belfast as Trust of Residence		
			Area	No of births	Percentage*
Belfast Trust	794	65%			
South Eastern Trust	27	2%	North	558	70%
Northern Trust	396	32.5%	South	32	4%
Southern Trust	3	0.5%	East	20	2%
Western Trust	1	-	West	170	22%
Great Britain/Republic Of Ireland	1	-	Castlereagh	14	2%
TOTAL	1222	100%	TOTAL	794	100%

\*Percentages have been rounded up for ease of reading

## 3.5 Table 3 highlights the current provision of Maternity Services in the Belfast Trust.

Table 3: Current Maternity Services Provision in Belfast Trust

Unit/Team	Services Provided
Community Midwife team	Ante-natal care (or shared with GP/Obstetrician), Home Birth;  Post-natal care (when woman returns home after childbirth); Provides services across Belfast from 3 community bases.
Mater Maternity Unit*	Antenatal care: women are booked for care with an obstetrician or midwife;  Care during Labour: <ul style="list-style-type: none"> <li>- daytime consultant obstetric presence;</li> <li>- Middle grade obstetric doctor available on site to 5pm;</li> <li>- Out of hours service supported by an obstetric doctor on-call from home;</li> <li>- access to theatres and anaesthetics, shared with other services;</li> <li>- 1:1 midwifery care in labour;</li> </ul> Women who have concerns during their pregnancy currently self-refer to the Maternity Unit for review by midwives and medical team; Postnatal inpatient care.
Royal Jubilee Maternity Service	Antenatal care: women are booked for care with an obstetrician or midwife; A 24 hour Emergency Admission and Assessment Unit;  Care during labour: <ul style="list-style-type: none"> <li>- daytime consultant obstetric presence;</li> <li>- senior obstetric doctor with a minimum of 6 years training on site 24 hours a day, 7 days per week;</li> <li>- an anaesthetic team with prime responsibility to support the obstetric service;</li> <li>- 1:1 midwifery care in labour;</li> </ul> Postnatal Care inpatient and community; A Day Obstetric Unit/Centre for Foetal Medicine.
Neonatal & Paediatric Services	Regional Neonatal Unit Neonatal Transport Service The Children's Hospital
Regional Specialist Clinics	Provision of joint clinics for women with a range of specialist requirements including Diabetes, Endocrinology, Cardiology, Neurology, or Haematology.

**Notes:**\* Where women booking for the Mater Hospital are assessed as potentially high risk pregnancies, these women are transferred to the Royal Jubilee Maternity Service.

**Midwives** provide care to all women, whether or not they are considered at high or low risk, and take primary responsibility (midwife led) for women throughout straightforward pregnancies and during labour and birth.

The Trust supports a Home Birth option and women who choose to have a home birth will be looked after by community midwives integral to the Belfast maternity service.

**Intrapartum Care** is the care of the mother and fetus during labour and the birth process.

#### 4. Why reorganise Maternity Services now?

4.1 Safety and quality underpin all health and social care services. Evidence shows that a focus on normalising birth results in better quality, safer care and an improved experience for mothers and their babies<sup>6</sup>. Pregnancy and childbirth is not without risk and appropriate interventions can and do save the lives of mothers and babies. However interventions are not risk free and can be associated with complications. In the Department's Quality Strategy<sup>7</sup> there is a clear commitment to safety – “avoiding and preventing harm to patients and clients from the care, treatment and support that is intended to help them.”

4.2 The DHSSPS Maternity Services Consultation - a draft Maternity Strategy for Northern Ireland (2011)<sup>8</sup> recommended that there should be both greater focus on the ‘normalisation’ of births and the availability of safe, high quality obstetric services for those who need them. The draft Maternity Strategy indicates that appropriately skilled and trained obstetric, neonatal and anaesthetic decision makers should be available on site to support consultant availability throughout the 24 hour day in Consultant Led Units. This standard is met in the Royal Jubilee Maternity Service but cannot be delivered in the Mater Hospital. This point was also recognised in an RQIA Review of Intrapartum Services<sup>9</sup>, which expressed concern about the future sustainability of two consultant-led units in such close proximity in Belfast.

4.3 In the Commissioning Plan,<sup>10</sup> 2011/12, the Health & Social Care Board (Board) and Public Health Agency (PHA) indicate their intention to deliver the recommendations of the DHSSPS Regional Review of Maternity Services and refer to the importance of a paediatric inpatient unit co-located with a consultant obstetric unit. They highlight that the only consultant obstetric unit without a co-located paediatric inpatient unit is the Mater Hospital.

6 “Promoting Normal Birth” NHS Institute for Innovation and Improvement 2010 <http://www.institute.nhs.uk/images//documents/Building-Capability/HIA/4.Promoting%20normal%20birth.pdf>

7 Quality 2020: A Ten Year Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland, DHSSPS 2011

8 Maternity Services Consultation:- a draft Maternity Strategy for Northern Ireland, DHSSPS, 2011

9 RQIA: Report on the RQIA Review of Intrapartum Care March 2011 [http://www.rqia.org.uk/cms\\_resources/Southern%20Report%20Published%20Version%2011%20May%2010.pdf](http://www.rqia.org.uk/cms_resources/Southern%20Report%20Published%20Version%2011%20May%2010.pdf)

10 Commissioning Plan 2011/12, the Health & Social Care Board (Board) & Public Health Agency (Page 68).

- 4.4 The Regional Review of Health and Social Care in Northern Ireland 'Transforming Your Care'<sup>11</sup> will shape the delivery of health and social care over the next decade. In relation to maternity services, the review recommends that:
- services in consultant-led obstetric and midwife-led units should be available dependent on need;
  - promotion of the normalisation of birth, with midwives leading care for straightforward pregnancies and labour, and reduction over time of unnecessary interventions;
  - continuity of care for women throughout the maternity pathway.
- 4.5 In the Belfast Trust response to the DHSSPS 'Maternity Services Consultation - a draft Maternity Strategy for Northern Ireland' (2011)<sup>12</sup>, the Trust emphasised that:
- Women with high risk pregnancies should continue to be treated within the regional centre for maternity services at the Royal Jubilee Maternity Service;
  - The regional maternity centre must continue to be located adjacent to the Royal Victoria Hospital which can provide a full range of specialist services for pregnant women and new mothers, including interventional radiology and intensive care;
  - Prenatal services at the Royal Jubilee Maternity Service require the on-site back up from the full range of paediatric specialties based in the Children's Hospital; Preterm babies should be looked after in a neonatal unit staffed 24/7 by appropriately qualified consultant Neonatologists.
- 4.6 The Trust has reviewed its existing arrangements for consultant obstetric presence in its labour wards, the provision of the neonatal service at the Mater Hospital and the training needs of junior medical staff. The Belfast Maternity service has concerns about the impact of delivering safe and sustainable services within two consultant obstetric services in the medium term. Therefore the Belfast Trust believes that there is a need for change in the Trust's Maternity Services.
- 4.7 Labour ward consultant obstetric presence is required to ensure quality decision-making in the clinical care of women and babies and support and training for junior doctors. Whilst the Royal Jubilee Maternity Service meets the Maternity Strategy expectation that appropriately skilled doctors are on site 24/7<sup>13</sup>, the Mater Hospital cannot provide this level of medical expertise on site 24/7.
- 4.8 The Mater Hospital relies on locum doctors to fill the service gaps in rotas for the team of doctors who provide support to the consultant obstetric staff. The number of junior doctors allocated to the Mater Hospital is limited by training requirements which must ensure that doctors work in a way that develops their skills, knowledge and expertise. Bringing together consultant-led obstetric services onto one site would provide the appropriate clinical support for the doctors in training, which cannot be provided in the current split site arrangement.
- 4.9 The regional neonatal team from the Royal Jubilee Maternity Service supports the daytime neonatal cover at the Mater Hospital and out of hours support is provided by locum consultants on call from home. Bringing together consultant-led obstetric service onto one site will mean that the neonatal team will only be required to support intranatal care in one setting.

<sup>11</sup> Transforming Your Care, A Review of Health and Social Care in Northern Ireland, Health and Social Care Board, December 2011

<sup>12</sup> Maternity Services Consultation: - a draft Maternity Strategy for Northern Ireland, DHSSPS, 2011

<sup>13</sup> RJMS have an obstetric doctor on-site 24 hours a day with a minimum of 6 years training in obstetrics.

#### 4.10 How were the Options for reshaping Maternity Services assessed?

The Belfast Trust Maternity Project Group considered that the key criteria in assessing the options for the delivery of maternity services across the Belfast Health and Social Care Trust are:

- 4.11 **Safety and Sustainability** – the need to provide choices for women and their partners within a safe and sustainable service;
- 4.12 **Quality and Effectiveness** – maternity services should maintain and enhance, where possible, their quality, effectiveness and efficiency;
- 4.13 **Clinical Linkages** – maternity services must be appropriately clinically linked to ensure that relevant specialist services are available to women and their babies;
- 4.14 **User accessibility** – maternity services must be accessible to women and their partners; and
- 4.15 **Strategic Compatibility** – the organisation of maternity services should complement the strategic direction set by the Belfast Health and Social Care Trust, the Health and Social Care Board and the Public Health Agency.

A locum doctor is a professionally-qualified, medical practitioner who is appointed to provide either short-term cover for a doctor who is temporarily unavailable for work, or, on a longer term temporary basis, to fill a vacant post.



## 5. Consideration of the options for the future delivery of Maternity services

- 5.1 Five options were initially considered by the Belfast Trust Maternity Project Group and these are summarised below:

**Option 1 Maintain** Consultant-led Obstetric services at the Royal Jubilee Maternity Service and Mater Hospital, including current models of **Midwife-Led Care** in both units (this is the status-quo);

**Option 2 Establish** one Consultant-led Obstetric service and an **alongside Midwife-Led Unit** at the Royal Jubilee Maternity Service only;

**Option 3 Establish** one Consultant-led Obstetric Service, including current models of midwife-led care, at the Royal Jubilee Maternity Service and a **free-standing Midwife-Led Unit** at the Mater Hospital;

**Option 4 Establish** one Consultant-led Obstetric service and an **alongside Midwife-Led Unit** at the Mater Hospital only.

**Option 5 Establish** one Consultant-led Obstetric Service, including current models of midwife-led care, at the Mater Hospital and a **free-standing Midwife-led Unit** at the Royal Jubilee Maternity Service.

- 5.2 Following initial consideration, the Project Group concluded that Options 4 and 5 were not achievable for a number of reasons:
- Clinically, the Mater Hospital does not have the range of services on site which some women will need to access, such as diabetes, endocrinology, haematology, neurology or cardiology;
  - The Mater Maternity Unit is physically removed from the Children’s Hospital, whose close access to the Royal Jubilee Maternity Service is of significant benefit to Maternity Services;
  - Safety would be compromised as the Regional Neonatal Unit (NNU) is located in the Royal Jubilee Maternity Service on the Royal Hospitals site. Option 4 and 5 would mean that there would a requirement for increased neo-natal provision at the Mater Hospital as all high risk births would take place there at a distance from the NNU;
  - Whilst there is physical capacity within the Mater Maternity Unit to support the current 1200 births per annum, the Unit is unable to support the delivery of a significant increase in births and is unlikely to achieve capital funding to enable appropriate infrastructure to be developed.

5.3 Three options were therefore taken forward for further consideration by the Maternity Project Group:

**Option 1 Maintain** Consultant-led Obstetric services at the Royal Jubilee Maternity Service and Mater Hospital, including current models of **Midwife-Led Care** in both units (this is the status-quo);

**Option 2 Establish** one Consultant-led Obstetric service and an **alongside Midwife-Led Unit at** the Royal Jubilee Maternity Service **only**;

**Option 3 Establish** one Consultant-led Obstetric Service, including current models of midwife-led care, at the Royal Jubilee Maternity Service and a **free-standing Midwife-Led Unit** at the Mater Hospital.

5.4 The Belfast Trust Maternity Project Group identified the key advantages and disadvantages of each option, as summarised below.

**Option 1 Maintain** Consultant-led Obstetric services at the Royal Jubilee Maternity Service and Mater Hospital, including current models of **Midwife-Led Care** in both units (this is the status-quo);

**Advantages**

- Women have some choice in how and where they wish to have their maternity care as consultant-led and midwife-led care are available on each site (choice dependent on clinical risk factors). Where required, women are transferred to access specialist services in the Royal Jubilee Maternity Service;
- This option sustains the regional nature of the Royal Jubilee Maternity Service, with its linkages to the specialist clinical services on the Royal Hospitals site for those women and babies who require care from other specialist services, for example, diabetes, epilepsy, neurology or cardiology teams.



## Option 1

## Disadvantages

- Safety for women is not assured because of the lack of 24 hours a day on-site medical support in the Mater Hospital;
- Safety is not optimal because of the difficulties in sustaining neonatal service at the Mater Hospital;
- Safety is not assured because junior doctors in obstetrics, anaesthetics and doctors supporting the neonatal services provide cover from home, as highlighted in the RQIA report<sup>14</sup> and there will continue to be a reliance on locum doctors to support the service;
- Women attending the Mater Hospital, who have specialist assessment needs alongside their obstetric care, will need to also attend the Royal Hospital site or may need to change their delivery location;
- Access to the anaesthetic service at the Mater Hospital is shared with other services and there is no dedicated maternity theatre on the Mater site;
- This option will not help alleviate the current problems within the service in sustaining clinical rotas as consultant led care will remain on two sites;
- The duplication of both consultant-led and midwife-led services on each site is not the most efficient and effective use of resources;
- Continuing to provide services in the same way is not in line with the Trust and regional strategic direction for women's services.

<sup>14</sup> Report of the RQIA Review of Intrapartum Care, RQIA (2010)

Summary of Option 1 consideration					
Option 1	Safety and Sustainability	Quality & Effectiveness	Clinical linkages	User accessibility	Strategic Compatibility
	X	√	√	√	X

**Option 2: Establish** one Consultant-led Obstetric service and an **alongside Midwife-Led Unit** at the Royal Jubilee Maternity Service **only**.

**Advantages**

- This option, with the availability of an alongside Midwife-Led Unit, ensures that women and their partners have a clear choice in the type of care they wish to have within the Belfast Trust;
- Safety would also be maximised by having one neonatal staffing demand at the Royal Jubilee Maternity Service. This option would mean that there would no longer be a requirement for a neonatal division of labour at the Mater Hospital;
- This option would improve safety for all women, as consultant led obstetric care will be concentrated in one location;
- This option sustains the regional nature of the Royal Jubilee Maternity Service, with its linkages to the specialist clinical services on the Royal Hospitals site for those women and babies who require care from other specialist services, for example, diabetes, epilepsy, neurology or cardiology teams.
- Antenatal care will continue to be provided locally in both the Mater Hospital and Royal Jubilee Maternity Service. This will ensure local accessibility for women during the antenatal stage of their pregnancy and admission only to the Royal Jubilee Maternity Service for delivery;
- Training and supervision of junior doctors will be significantly improved as a consequence of single site consultant-led care;
- Having consultant led care in one location will significantly improve training and supervision of junior doctors.

**Disadvantages**

- This option would have a perceived detrimental impact on local accessibility for women, in determining the location for the delivery of their babies;
- This option offers limited choice of delivery location for women;
- Both Consultant-led and midwife-led care will only be available at the Royal Jubilee Maternity Service leaving no maternity provision at the Mater Hospital and this would reduce the choice available to women and their partners;
- There is evidence of increased rates of intervention where consultant-led and alongside midwife-led units are co-located;
- This option is not in line with the Trust and regional strategic direction for women’s services.

Summary of Option 2 consideration

Option 1	Safety and Sustainability	Quality & Effectiveness	Clinical linkages	User accessibility	Strategic Compatibility
	√	√	√	X	X



**Option 3: Establish** one Consultant-led Obstetric Service, including current models of midwife-led care, at the Royal Jubilee Maternity Service and a **free-standing Midwife-Led Unit** at the Mater Hospital.

**Advantages**

- This option, with a freestanding Midwife-Led Unit at the Mater Hospital, would ensure that women and their partners have an extended and clearer choice in the type of maternity care they wish to have within the Belfast Trust;
- Safety for newborn babies would be maximised by having one neonatal staffing demand at the Royal Jubilee Maternity Service. This option would mean that there would no longer be a requirement for a neonatal division of labour at the Mater Hospital. Should the need arise, the baby will be transferred from the Midwife-Led Unit to the Royal Jubilee Maternity Service;
- This option will help alleviate the current problems within the service in sustaining clinical rotas as consultant led care will be in one location;
- This option would improve safety for all women as consultant led obstetric care will be concentrated in one location;
- Training and supervision of junior doctors will be significantly improved as a consequence of single site consultant-led care and there will be a decrease in the reliance on locum doctors to support service delivery;
- This option sustains the regional nature of the Royal Jubilee Maternity Service, with its linkages to the specialist clinical services on the Royal Hospitals site for those women and babies who require care from other specialist services, for example, diabetes, epilepsy, neurology or cardiology teams;

- This option will continue to provide maternity services in two locations, thus supporting accessibility of service delivery;
- The Royal Jubilee Maternity Service has physical capacity to accommodate increased activity;
- Following approval for a new maternity hospital at the Royal Hospitals, planning has begun for the Royal Jubilee Maternity Service to move into new accommodation which will also have the necessary physical capacity for the scale of births envisaged;
- The Mater Hospital has physical capacity to support a free-standing Midwife-Led Unit;
- This option is in line with the Trust and regional strategic direction for Women’s services.

**Disadvantages**

- Consultant-led care will only be available at the Royal Jubilee Maternity Service. This may impact on the accessibility of the service for some women and their partners.

Summary of Option 3 consideration					
Option 1	Safety and Sustainability	Quality & Effectiveness	Clinical linkages	User accessibility	Strategic Compatibility
	√	√	√	√	√

## 5.5 Preferred Option

The recommendation from the Belfast Trust Maternity Project Group is that **Option 3** is the preferred option:

**Establish** one Consultant-led Obstetric Service, including current models of midwife-led care, at the Royal Jubilee Maternity Service and a **free-standing Midwife-Led Unit** at the Mater Hospital.

**Option 3 is the preferred option for the Belfast Maternity Service because it will:**

- Give women greater choice in their options for maternity care, with the change to a Free-standing Midwife-Led Unit at the Mater Hospital;
- Improve safety for all women by bringing together the Labour Ward consultant obstetric presence in one unit;
- Maintain the existing clinical linkages to other regional services on the Royal Hospital site, including the Regional Neonatal Unit and The Children's Hospital;
- Offers the necessary physical capacity to accommodate one consultant-led obstetric service in the Royal Jubilee Maternity Service;
- Locate a free-standing Midwife-Led Unit at the Mater, where the necessary physical capacity exists;
- Significantly improve training and supervision of junior doctors as a consequence of single site consultant-led care;
- Align with the strategic direction set by the Belfast Health and Social Care Trust and the Health and Social Care Board/Public Health Agency.

6. What would this mean for women and their partners, for staff and Trust sites?

6.1 For Women, their partners and their babies

- Women will continue to have the choice to access locally available antenatal care and receive appropriate assessment and support to make the best choice for their place of birth;
- There is one location for consultant-led obstetric services supported by a comprehensive Neonatal Service;
- Specialist access for women and babies who require care from other services will be available either during pregnancy, birth or in the postnatal period;
- Women will have an option to give birth to their baby in a Free Standing Midwife-Led Unit in the Mater Hospital.

6.2 For Staff

- Teams will be equipped to meet the needs of women by concentrating their skills to give significantly improved levels of expertise and clinical decision making at all times;
- Improved on site support for junior medical staff in training through increased physical presence in Delivery Suite and decreased reliance on locum cover;
- More effective deployment of staff in the service, supporting team development and improved clinical care;
- The Neonatal team will be able to concentrate their resources on one site.
- There will be no loss of permanent staffing across the service.

6.3 For Trust Sites

- Strategic development of a free-standing Midwife-Led Unit supports the Trust and regional strategic direction for normalisation of births;
- There is physical capacity in the Royal Jubilee Maternity Service and Mater Hospital to accommodate the preferred option.

## 7. Workforce

### What does this mean for Staff?

It is important to acknowledge the contribution, skills, knowledge and expertise of the staff who deliver Maternity Services within the Trust. The Trust values and recognises that it is through our staff that the organisation delivers high quality care. The Trust is fully committed to supporting staff through periods of change.

The proposal set out in this consultation document is to develop a single Consultant led Maternity Service with Midwifery-led care at the Royal Jubilee Maternity Services (RJMS) and a free-standing Midwifery-led Unit at the Mater Hospital.

The Maternity Service is delivered by 378 staff in Royal Jubilee Maternity and 54 staff at the Mater Hospital. The staff include:-

- 21 Medical staff\*
- 361 Midwives and Nurses
- 39 Administrative and Support staff
- 11 Professional and Technical staff

The proposal will impact on the staff delivering the Maternity Services, however, it is not anticipated there will be a reduction in funded staffing levels as a result of this proposal.

In addition there are other staff employed by the Trust who provide a service to the Maternity Service, for example staff employed in Patient Client Support Services, Health Records, Theatres and other areas. While not directly affected in the same way as Medical or Midwifery staff for example, these staff and services will be included in the consultative process of this service change.

### If the proposal is approved the main impacts anticipated for staff will be:-

#### Relocation / Redeployment

The proposal will involve the relocation and/or redeployment of some staff and posts for Medical, Nursing and Midwifery and Administrative staff, to facilitate the reconfiguration to a consultant-led obstetric service at RJMS and the creation of a free standing Midwife led Unit at the Mater Hospital.

Where staff need to be relocated and/or be redeployed the Trust has in place an agreed Framework on the Management of Staff affected by Organisational Change and Staff Redeployment Protocol. These have been developed and agreed with Trades Unions in recognition of the fact that location of work is of major importance to staff in supporting and minimising the impact on staff through periods of change. These arrangements also provide the provision of the national Terms and Conditions on issues such as excess mileage and the application of the Trust's Flexible Working Arrangements.

#### New Ways of Working/Re-training or Re-skilling

As the Trust is proposing to reconfigure maternity services, staff whose job roles may change, will be offered appropriate training/re-training.

#### Providing Support for Staff

In dealing with any proposal the Trust is committed to ensuring that the process is characterised by openness, transparency, involvement, recognition and engagement with its staff and Trades Unions. The Trust will put in place a range of support mechanisms which can be tailored to the specific needs of the individual. These may include, as appropriate, individual staff support, induction, skills analysis to identify staff needs and support the transition to the agreed change in service, advice and guidance on Human Resource Policies and Procedures.

#### Partnerships

The Trust will work in partnership with Trades Unions and in accordance with the agreed Frameworks.

These proposals are subject to this consultation process and an Equality Impact Assessment which will inform the decision to be made. The Equality Impact Assessment provides more detail on the impact of staff and service users.

\* These figures do not include junior doctors who are placed on rotation as part of their training.

## 8. Conclusions and Recommendations

In the context of the proposal to reshape the delivery of maternity services, and the consideration of the available options, this document was approved for consultation by Belfast Health and Social Care Trust at the Trust Board meeting on **1 March 2012**.

We are now seeking staff, service user and public views on the proposed option. Please refer to section 9 for the consultation questions.

## 9. Your Opportunity to Have Your Say – Consultation Questions

This document represents a formal consultation between the Belfast Trust and the citizens we serve on how we should deliver maternity services. The consultation period will open on **1 March 2012** and close on **31 May 2012**.

We are sending this paper to staff, key groups and stakeholders and Trades Unions. We will also respond to requests for further clarification and discussion as best we can. The documents will be available on both the Trust's intranet and internet pages.

We will hold a series of meetings with relevant parties to ensure they have all the relevant information to respond to the Consultation. A report will be presented to Trust Board following the consultation period. The Trust Board meeting is open to the public.

Consultation Questions:

- 1a Do you think our proposal to reshape maternity services across Belfast meets the needs of women and their partners?
- 1b If not, why not?
- 2a Do you agree with the proposal to centralise consultant-led obstetric services within the Royal Jubilee Maternity Service?
- 2b If not, why not?
- 3a Do you agree with the proposal to locate a free-standing Midwife-Led Unit at the Mater Maternity Unit?
- 3b If not, why not?

## Appendix 1 Glossary

## Glossary of abbreviations

BHSCT	Belfast Health and Social Care Trust
DHSSPS	Department of Health Social Services and Public Safety
RJMS	Royal Jubilee Maternity Service
RBHSC	Royal Belfast Hospital for Sick Children
RMH	Royal Maternity Hospital
RVH	Royal Victoria Hospital
MIH	Mater Infirmorum Hospital
MMU	Mater Maternity Unit
MLU	Midwife-Led Unit
DOU	Day Obstetric Unit
RFC	Regional Fertility Clinic

## Appendix 2

## Your invitation to comment

Please tell us your name and address at the beginning of your reply. If you are commenting on behalf of an organisation, please tell us its name and what it does. If you have consulted other people or organisations, please let us know. Responses in writing should be sent to:

Mr C Donaghy, Chief Executive  
Belfast Health and Social Care Trust  
c/o Public Liaison Service  
Communications Department  
1<sup>st</sup> Floor, Nore Villa  
Knockbracken Healthcare Park  
Saintfield Road  
Belfast BT8 8BH

Alternatively, comments may also be emailed to:

[stakeholdercomms@belfasttrust.hscni.net](mailto:stakeholdercomms@belfasttrust.hscni.net)

visit our website

<http://www.belfasttrust.hscni.net/about/RightService-RightPlace-Maternity.htm>

## Freedom of Information Act (2000) – Confidentiality of Consultations

Belfast Trust will publish an anonymised summary of responses following completion of the consultation process; however your response, and all other responses to the consultation, may be disclosed on request. We can only refuse to disclose information in limited circumstances.

Before you submit your response, please read the paragraphs below on the confidentiality of consultations and they will give you guidance on the legal position about any information given by you in response to this consultation.

The Freedom of Information Act gives the public a general right of access to any information held by a public authority, in this case, Belfast Trust. This right of access to information includes information provided in response to a consultation. We cannot automatically consider information supplied to us in response to a consultation as information that can be withheld from disclosure. However, we do have the responsibility to decide whether any information provided by you in response to this consultation, including information about your identity, should be made public or withheld.

Any information provided by you in response to this consultation is, if requested, likely to be released. Only in certain circumstances would information of this type be withheld.

### Appendix 3 Equality and Human Rights

Equality and human rights underpin the services that health and social care provide. They are integral to all functions of the Belfast Health and Social Care Trust such as service delivery, policy formulation, employment and procurement.

The Trust recognises that equality in health and social care is not about people getting the same treatment – equality means people accessing person-centred, person-led, quality care which meets their needs.

Human rights are founded on 5 fundamental values: fairness, respect, equality, dignity and autonomy. The Trust has incorporated both respect and dignity in its corporate values and behaviours.

Moreover, the Trust's higher purpose is to improve health and well-being and reduce health inequalities – by working in partnership with others and by engaging with staff to deliver safe, improving, modernising cost effective health and social care.

Under Section 75 of the Northern Ireland Act 1998, the Belfast HSC Trust is obliged to consider the implications for equality of opportunity and good relations. As part of this assessment, the Trust also considers implications for human rights and disability. This means the Trust is not only morally and ethically bound to deliver its acute services to its users in an equitable fashion with respect and dignity; but it also is statutorily bound to do so.

### Section 75 of the Northern Ireland Act 1998

Section 75 (1) of the NI Act 1998 requires Belfast HSC Trust, in carrying out its work, to have due regard to the need to promote equality of opportunity between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation, between men and women generally, between persons with a disability and persons without and between persons with dependants and persons without. Section 75 (2) requires the Trust to promote good relations between persons of different religious belief, political opinion or racial group.

The Trust is carrying out an equality impact assessment on this proposal to ensure that it undergoes a full and systematic analysis to firstly, determine the extent of differential impact upon the 9 aforementioned groups and secondly establish if that impact is adverse.

If so, the Trust must consider alternative policies to better achieve equality of opportunity or measures to mitigate the adverse impact.

The Belfast Health and Social Care Trust is committed to listening to the view of staff, service users, carers and families and advocacy groups and the wider public and making an informed decision on the basis of these consultation responses.

The EQIA pertaining to this proposal can be found at

<http://www.belfasttrust.hscni.net/involving/Consultation.html>



Appendix 4	The Belfast Trust Maternity Project Group Membership
Name	Title
Eliz Bannon (Chair)	Co Director, Specialist Hospitals, Women and Children Health Services
Dr Stephen Austin	Consultant Anaesthetist, LNC Representative
Orla Barron	Health and Social Inequalities Manager
Louise Beckett	Senior Human Resources Manager
Denise Boulter	Consultant Midwife, Public Health Agency
Deirdre Brady	Chief Executive, Tiny Life
Ruth Clarke	Maternity Services Manager/Head of Midwifery
Albert Clugston	Unison Representative
Iain Deboys	Assistant Director, Belfast Local Commissioning Group
Maureen Doyle	Equality Manager
Melanie Fitzpatrick	Trades Union Representative, Royal College of Midwives
Miriam Gibson	Employment & Equality Manager
Janet Johnson	Service Manager, Anaesthetics and Theatres
Heather Kyle	Senior Midwife, Intrapartum and Midwifery & Triage Services
Dr Clifford Mayes	Consultant, Regional Neonatology Unit and Neonatal Lead
Anne McAuley	Governance Lead, Specialist Hospitals, Women & Children
Dr Donagh McDonagh	Associate Medical Director for GPs, Belfast Trust
Bernie McQuillan	Co Director, Strategic Planning
Christina Menage	Senior Midwife, Antenatal Outpatients, Postnatal Wards and Community
Diane Mulligan	Corporate Communications and Public Liaison
Dr Mary Murnaghan	Consultant, Obstetrics and Gynaecology + NIMDTA representative
Geraldine Nolan	Strategic Development Manager
Dr Stephen Ong	Consultant Obstetrician and Obstetric Lead
Joan Peden	Co Director, Human Resources
Dr Dale Spence	Maternity Services Liaison Committee representative
Dr Richard Wright	Associate Medical Director, Specialist Hospitals, Women and Children Health Services

## Appendix 5 Staff Involved in Providing Maternity Care

**General Practitioners** have a responsibility for providing holistic care to the whole family. They also have a continuing role in promoting health and treating illness in pregnancy. In most circumstances, they are the professional who confirms pregnancy and many are still involved, to varying degrees, in providing 'shared care' during pregnancy and the postnatal period, especially for women with higher risk pregnancies.

**Midwives** are the main providers of care to women throughout pregnancy, childbirth and the postnatal period. They provide clinical care and emotional support in both hospital and community settings, and are usually the lead professional throughout pregnancy and childbirth for women with low risk pregnancies. Their expertise is in normal pregnancy, childbirth and postnatal care, and in making referrals to appropriate medical professionals and others if they detect deviations from the normal. They also have a significant role in health education and in supporting the mother and family in the transition to parenthood.

**Obstetricians/Gynaecologists** are expert in all aspects of pregnancy and childbirth. They may be generalists or subspecialists in maternal foetal medicine, infertility, gynaecological oncology, gynaecological urology or community gynaecology. Obstetricians have a specific expertise in treating complications of pregnancy and childbirth, and providing specialist screening and treatment.

Women with a high risk pregnancy will have their care managed by an obstetrician, with midwifery and GP support. Other women may see obstetricians to receive specialist advice, have access to specialist screening, or to meet the consultant who will be responsible for providing care if their pregnancy becomes high risk or if emergency support is required.

**Neonatologists who** are fully trained in resuscitation and stabilisation of sick newborn babies have a responsibility for looking after the medical needs of all babies, including premature infants, babies who are ill, and babies with congenital abnormalities. Neonatologists are paediatricians who specialise only in the care of the newborn baby and they develop and supervise intensive care, high dependency and special care services.

Neonatologists work closely with obstetricians and midwives to plan care of newborn babies when complications have been identified prior to birth. Planning with the parents may include choosing the optimal time of birth, maturing the baby prior to delivery, and organising the appropriate intensive care facilities for the sick newborn baby.

**Obstetric Anaesthetists** play an integral part in the team caring for women during pregnancy and childbirth. They currently provide care for approximately 35% of women in labour. Anaesthetists usually see women for counselling and advice at the request of an obstetrician, GP or midwife. They provide routine epidural services for women during childbirth and they are skilled in administering epidural, spinal and general anaesthesia to pregnant women and caring for them in emergency situations including high dependency and intensive care.

The **Ambulance Service** has an important role in the urgent and routine transfer of women and babies to maternity units by paramedics and ambulance crews trained to provide care for pregnant women and newborn babies.

## References

Report of the RQIA Review of Intrapartum Care, RQIA, 2010

New Directions – a conversation on the future delivery of health and social care services in Belfast – Belfast Health and Social Care Trust, 2008

Promoting Normal Birth, NHS Institute for Innovation and Improvement  
<http://www.institute.nhs.uk/images//documents/BuildingCapability/HIA/4.Promoting%20normal%20birth.pdf>

Quality 2020: A Ten Year Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland, DHSSPS 2011

Maternity Services Consultation: - a draft Maternity Strategy for Northern Ireland, DHSSPS, 2011

Commissioning Plan 2011/12, Health & Social Care Board & Public Health Agency

Transforming Your Care, A review of Health and Social Care in Northern Ireland, Health and Social Care Board, December 2011.





Response to the Belfast Health and Social Care Trust Consultation document: **Right Service, Right Place**

Please write or email to:

Mrs Orla Barron, Health & Social Inequalities Manager,  
Health & Social Inequalities, 1st Floor,  
Graham House, Knockbracken Healthcare Park, Saintfield Road,  
Belfast, BT8 8BH  
Tel: 028 90960069 Fax: 028 90566701 Textphone: 028 90902863  
E-mail: [orla.barron@belfasttrust.hscni.net](mailto:orla.barron@belfasttrust.hscni.net)

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The Belfast Trust in its public consultation document New Directions outlined key principles it determined were necessary to protect the dignity and rights of women giving birth in Belfast.

These were:

- Choice in how and where to give birth
- Continuity of care during child birth
- Control of maternity care based on clinical advice

These principles cannot be reconciled with the Trusts current proposal to end 'in patient' obstetric services in the Mater Hospital and transfer these services to the Royal Hospital site. The Mater Hospital has provided maternity services to the greater North Belfast population since its inception. At present 5% of all Belfast births take place in the Mater Maternity. 92% of births at the Mater are to women from North and West Belfast. It is also the first choice of over 400 women from other health

trusts, particularly to women from the Northern Board, who choose the Mater for a variety of reasons, including historic, but also because of the lack of maternity provision in their own areas. At present women who choose to give birth at the Mater Hospital can expect to avail of:

- Choice in Ante Natal Care with an either an obstetrician or mid wife
- Care during their labour
- Daytime consultant obstetric care
- Daytime junior obstetrician care
- On call out of hours obstetrician care
- 1:1 midwifery care in labour
- Postnatal in patient care
- Access to theatres and anaesthetics

In its current consultation document Right service, Right Place Belfast Trust puts forward 3 options for the future of Maternity Services at the Mater Hospital. These options are:

#### Option 1

Keep Consultant-led services at the Royal-Jubilee Maternity Service and Mater Hospital. This includes having Midwife-led care too.

#### Option 2

Have one Consultant-led service and an alongside Midwife-led Unit at the Royal-Jubilee Maternity Service only

#### Option 3

Have one Consultant-led service plus Midwife-led care, at the Royal-Jubilee Maternity Service and a freestanding Midwife-led Unit at the Mater Hospital.

The Trust recommends that Option 3 is the best because they claim it will give women more choices for Maternity care by having a freestanding Midwife Unit and make things safer for all women by bringing Consultant care into one unit at the Royal Maternity Hospital.

UNISON supports Option 1.

UNISON believes:

- It best meets the needs of women and their partners
- It protects local accessible maternity provision for women
- It keeps all options and choices available
- The other Trust proposals put the long term viability of the Mater under threat
- Consultant care, for those who need it, available on both sites is the best option
- It is the option supported by midwives at the Mater Hospital
- The new maternity hospital at the Royal is years from completion
- The Royal is currently under special measures
- There is no need to take this decision until the new maternity hospital is open

Belfast Trust claims of safety at the Mater need to be addressed and should be addressed by investment rather than the closure of services.

We fear that the Belfast Trust which has to save £35 million this year will use the clinical safety issue as cover for saving money whenever it can.

The best option for women and their families must not be prejudiced by the perennial financial crisis that they did nothing to create.

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