



Improving Healthcare Together 2020 to 2030

Hospital births and paediatric services

Having maternity and inpatient paediatrics (children's) services on one site would mean that specialist doctors would be available at all times.

There is a lot of evidence that this would benefit patients by improving quality of care and outcomes.

If you were pregnant

The process to follow would be the same as it is now.

As soon as you found out you were pregnant, you would make an appointment with your GP or at a hospital.

You would talk to your midwife about where to have your baby. This could include you choosing to have your baby at home.

If you chose to have your baby in hospital, your antenatal appointments would be at your nearest hospital, either Epsom or St Helier, and at your GP practice.

Where you would have your baby

If you chose to have a hospital birth, you would have your baby at the new specialist emergency care hospital.



We are proposing to build this new facility at one of our hospitals – Epsom, St Helier or Sutton. If our proposals go ahead, the new hospital would have a state-of-the-art maternity unit for the area. This would mean that specialist staff would be on hand if you or your baby needed medical care.

After the birth

Most women would leave the maternity unit seven to 24 hours after giving birth. A midwife from your nearest children's centre or health centre would continue to care for you and your baby, and would visit you at home.

Your postnatal appointments would be at Epsom or St Helier hospital or in the community (at home or at a children's centre or health centre), depending on your circumstances. This would be the same as it is now.

If your child needed an urgent or emergency appointment

If your child needed to be seen immediately, for minor injuries or illnesses, you would take them to your nearest urgent treatment centre (UTC) at either Epsom Hospital or St Helier Hospital (and also at Sutton if this is chosen as the location for the new specialist emergency care hospital). If staff at the UTC assessed that your child needed emergency care, they would arrange for an ambulance to take them to the specialist emergency care hospital.

If you thought your child may have a life-threatening injury or illness, you would dial 999 or take them to your nearest emergency department or the specialist emergency care hospital.





If your baby needed neonatal care

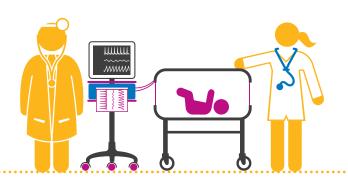
If you chose to have your baby in hospital, you would give birth on a ward at the new specialist emergency care hospital. This would be near to critical care, anaesthetics and the neonatal unit, to make sure specialists were available to provide the appropriate care for you and your baby.

If you had your baby at home, you would be transferred to an appropriate ward in the specialist emergency care hospital to make sure you and your baby were in the care of specialist doctors.

If your child needed inpatient or outpatient care

To make sure the best care would be available, our proposals would bring neonatal services, a paediatrics unit, a paediatric emergency department and children's inpatient beds together on the same site. This would reduce the time staff spend travelling between these services and improve response times for our patients. These services would be provided at the new specialist emergency care hospital which would be built at Epsom, St Helier or Sutton hospital.

Outpatient appointments would continue to take place as they do now at either Epsom or St Helier hospital.



Crystal Mark 23265
Clarity approved by Plain English Campaign