

## PUBLIC HEALTH LEWISHAM

Analysis of the Potential Impact of the Trust Service Administrator's Proposals for Health Services in SE London

Impact on the Health and Wellbeing of Lewisham Children and of Lewisham Women Requiring Maternity Services  
Additional Information on Projected Births by Provider

### Introduction

An earlier paper presented the findings of an in-depth analysis of the impact on the health and wellbeing of Lewisham Children and of Lewisham women requiring maternity services of the recommendations of the draft report of the South London Healthcare Trust Service Administrator (the TSA) on health services in SE London.

One of the issues examined in the earlier paper was the possible impact, in terms of increased numbers of births, on the other providers in SE London if Option 1 of the draft TSA report were implemented. The earlier paper predicted that, if the delivery units at Lewisham Hospital were to close, there would be over 9,000 births at King's College Hospital in 2013/2014, thus raising the issue of a possible double obstetric rota at King's (Table 1). These predictions were based on assumptions about women's choices based on how close they lived to each of the different units, and on a 4% increase in births over the year.

**Table 1** Projected increases in births in Maternity Units in SE London

<b>Trust</b>	<b>Births 210/11</b>	<b>Projected births from Lewisham borough 2013/14 all owing 4% increase in birth rate per annum</b>	<b>Total (not inclusive of trusts own projected increase)</b>
<b>GSTT</b>	<b>6849</b>	<b>386</b>	<b>7235</b>
<b>KCH</b>	<b>5835</b>	<b>3235</b>	<b>9070</b>
<b>PRU</b>	<b>4291</b>	<b>313</b>	<b>4604</b>
<b>QE</b>	<b>4266</b>	<b>2187</b>	<b>6453</b>

The current paper again looks at the possible future for other SE London providers should the delivery units at Lewisham close. The paper's estimates of the future numbers of births in other units are based on the known choices of Lewisham women and on GLA projections for Lewisham births and assumes that the number of births to non-Lewisham women in the other units will not increase. What these estimates tell us is that very quickly, the numbers of births at St Thomas's would exceed 8,000 and would remain at this level for the foreseeable future, thus again requiring consideration of a double rota at a major provider in SE London.

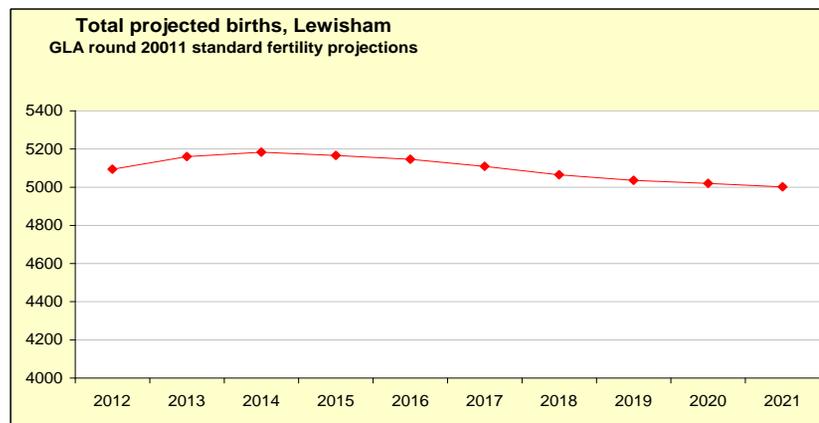
Lewisham women have clearly expressed their preferences about their choice of a provider as an alternative to Lewisham Hospital. Service user members of the Maternity Services Liaison Committee are also quite clear in their view that Lewisham women are much less likely to choose Queen Elizabeth Hospital as an alternative to Lewisham Hospital than they are to go to St Thomas's, Kings or the Princess Royal Hospital.

**So whether dispersal of births is determined by geographical proximity, or by likely choice based on present choices, either King's or St Thomas's hospital will soon require double obstetric rotas to be safe. This would be an unnecessary extra cost of the provision of maternity services in SE London, and when considered in conjunction with all the other disadvantages of Option 1, is yet another argument for the abandonment of Option 1 as a possible future for Lewisham maternity services.**

### **Predicted Future Births in Lewisham**

Using GLA projections, overall, births in Lewisham are expected to peak in 2014, and decline slowly to 2021 (Fig 1).

**Fig 1**



Numbers of projected births by ward and year are also provided by the GLA as part of its annual round of population projections (Table 2).

**Table 2 Projected births in Lewisham Wards**

Ward	Bellingham	Blackheath	Brockley	Catford South	Crofton Park	Downham	Evelyn	Forest Hill	Grove Park	Ladywell	Lee Green	Lewisham Central	New Cross	Perry Vale	Rush Green	Sydenham	Telegraph Hill	Whitefoot
2011	270	260	308	203	286	255	310	269	250	249	242	346	321	308	295	293	284	233
2012	277	265	306	216	290	256	319	266	250	253	252	370	314	307	305	319	296	231
2013	281	269	310	218	290	258	329	267	251	254	255	384	322	308	315	319	297	235
2014	282	270	311	217	289	257	336	265	249	253	255	394	327	306	322	317	296	237
2015	280	270	310	215	285	255	339	262	246	251	253	401	330	302	326	313	292	237
2016	278	269	308	213	282	253	342	259	243	248	251	408	332	298	330	308	288	237
2017	275	267	306	210	277	249	344	255	239	245	249	412	332	294	332	304	284	236
2018	271	265	303	206	272	246	345	250	235	241	245	418	333	288	335	298	279	234
2019	267	264	301	203	268	243	347	247	232	237	242	423	334	284	337	294	275	233
2020	265	264	300	201	265	240	350	245	229	235	240	430	336	281	341	292	272	232
2021	262	263	299	199	261	238	352	242	227	232	238	436	338	278	344	289	270	232

As already discussed in the earlier paper, there is considerable variation by ward in terms of changes in numbers of births across the borough as a whole, with some wards having a static or almost reducing picture whilst others, such as Lewisham Central, likely to see increases in the numbers of births occurring to women resident in those wards. This is because of the differing levels of development occurring in those wards.

### **Choices of Lewisham Women**

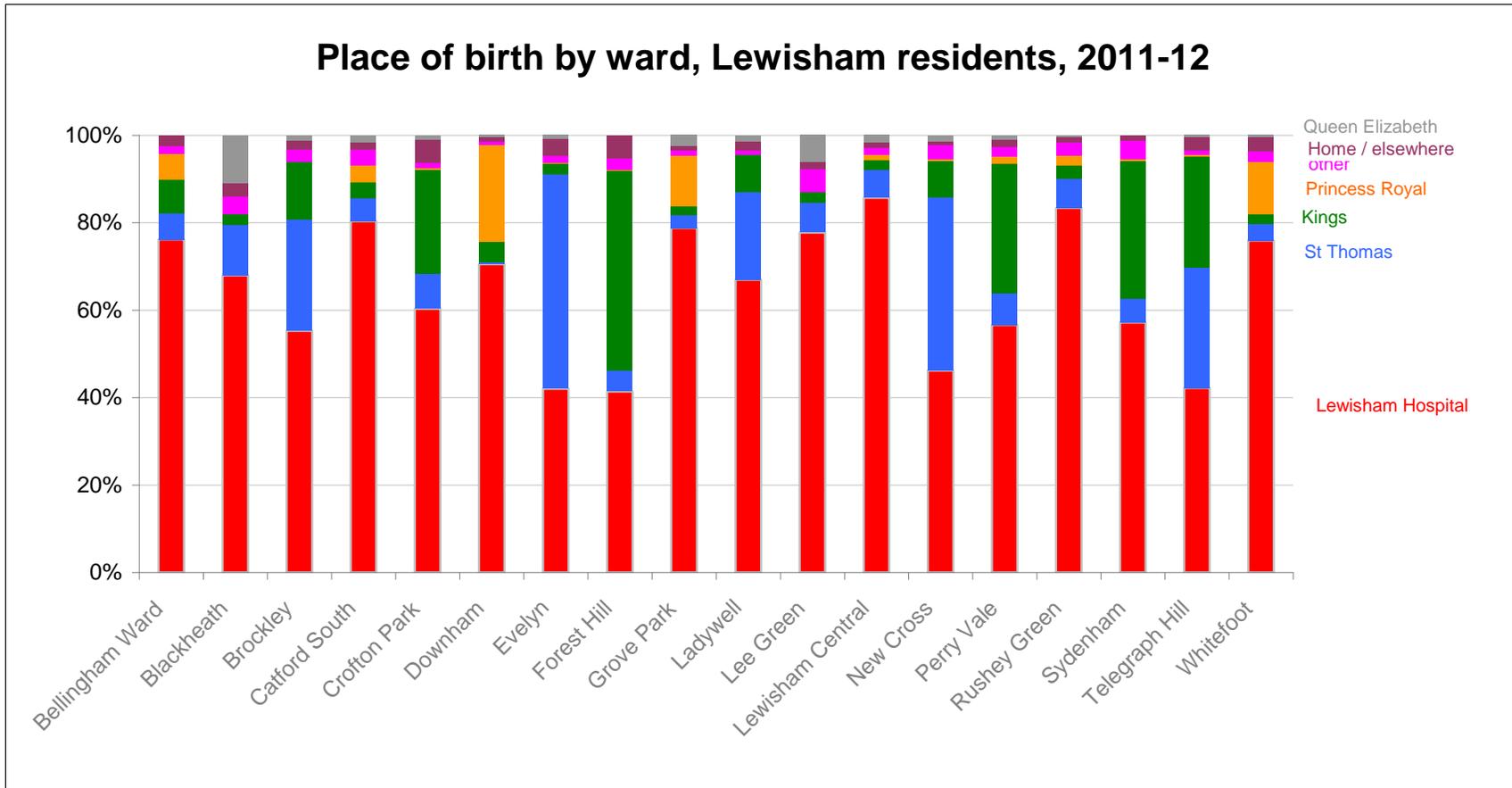
If we now look at where Lewisham women currently give birth, we see that after Lewisham Hospital, most women choose St Thomas's or King's College Hospitals, with few choosing QEH as a place of birth for their child (Table 3 and Fig 2).

**Table 3.** Place of birth of babies born to Lewisham women in 2011-2012 by ward of residence<sup>1</sup>

	Kings	Lewisham Hospital	other	Princess Royal	Queen Elizabeth	St Thomas	Home / elsewhere	Total
Bellingham Ward	22	217	5	17		17	7	285
Blackheath	6	155	9		25	26	7	228
Brockley	33	137	7		3	63	5	248
Catford South	9	200	9	10	4	13	4	249
Crofton Park	73	184	4	1	3	24	16	305
Downham	10	153	2	48	1	1	2	217
Evelyn	8	142	5	1	3	166	13	338
Forest Hill	140	127	8	1		15	16	307
Grove Park	5	189	3	28	6	7	2	240
Ladywell	20	154	2		3	46	5	230
Lee Green	6	192	13		15	17	4	247
Lewisham Central	6	251	5	4	5	19	3	293
New Cross	26	144	10	1	4	124	3	312
Perry Vale	92	175	7	5	3	22	5	309
Rushey Green	9	251	9	7	1	20	4	301
Sydenham	85	155	12	1		15	3	271
Telegraph Hill	62	103	3	1	1	67	7	244
Whitefoot	6	186	6	29	1	9	8	245
Grand Total	618	3115	119	154	78	671	114	4869
percent	12.7%	64.0%	2.4%	3.2%	1.6%	13.8%	2.3%	

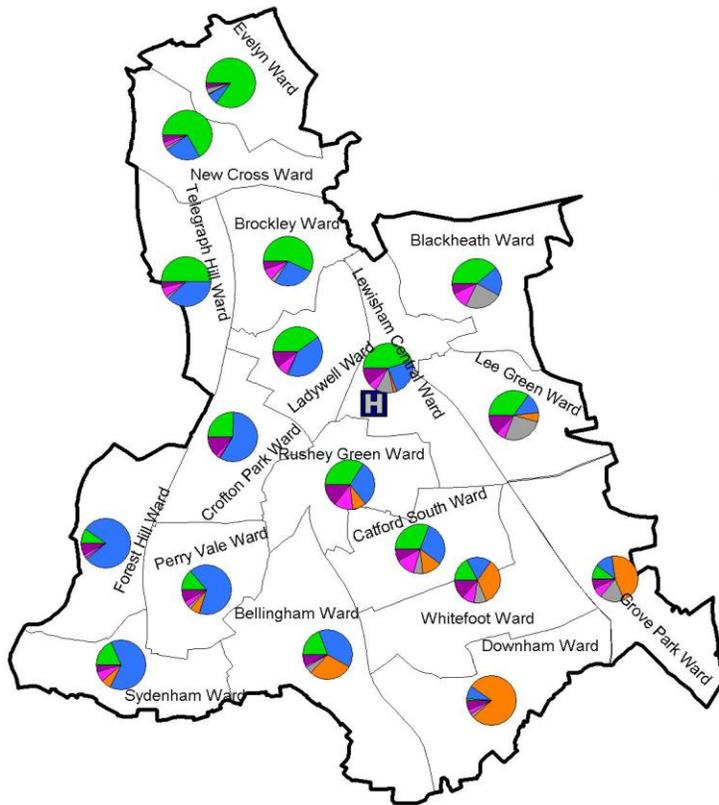
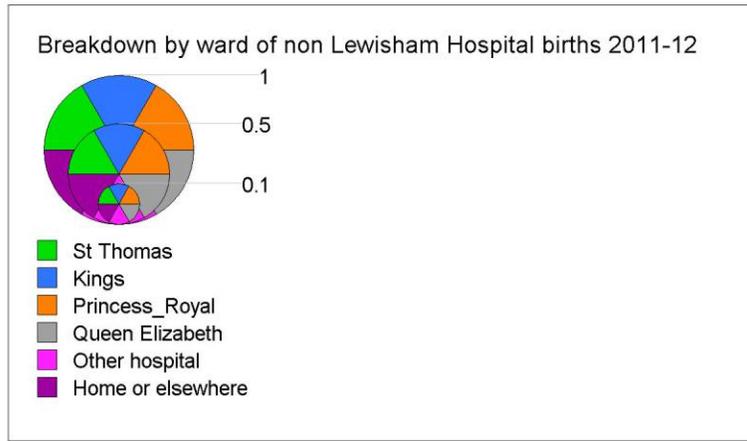
<sup>1</sup> Source: ONS Public Health Births Files

Fig 2

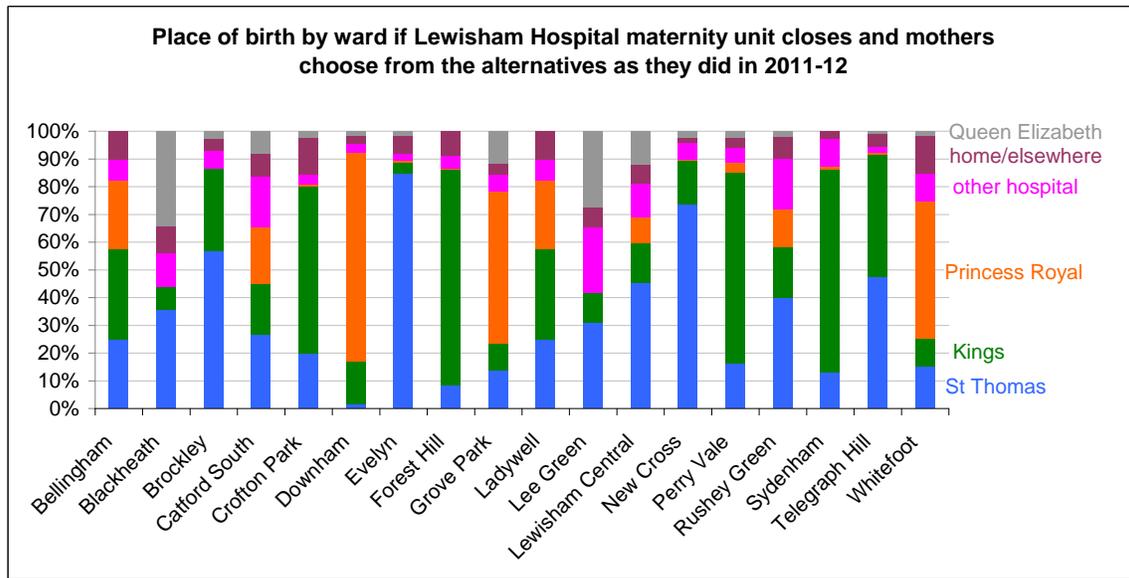


If we look more closely at where Lewisham's women chose to give birth in 2011-12, we can see that women resident in the North of the borough, if they do not choose Lewisham Hospital, tend to choose St Thomas's hospital, while those in the West of the borough tend to look toward King's College Hospital (Fig 3 and 4). Those in the South East tend to prefer the Princess Royal Hospital, but only small numbers on the East side of the borough choose Queen Elizabeth Hospital.

Fig 3



**Fig 4**



It is argued that the most likely outcome of closing the delivery units at Lewisham is that similar patterns of patient flow as occur at present would be found.

**Predicted Numbers of Birth by Provider**

On this basis, ie that women in Lewisham are likely to make the same sort of choice of alternative provider as they did in 2011-12, we can expect that if Lewisham’s delivery units close, the greatest proportion of births would occur at St Thomas’s, followed closely by King’s College Hospital, with only 4.4% of births occurring at QEH. (Table 4), giving rise to large numbers of extra births at these first two hospitals (Table 5). Numbers of total births at St Thomas’s would require consideration of the need for a double obstetric rota, and there would be almost 7,000 births at King’s (Table 6), assuming a constant number of births at these units to women from outside of Lewisham. Total births at St Thomas’s Hospital can be expected to be over 8000 per annum to at least the end of the decade

**Table 4** Predicted dispersal of births to Lewisham Women

St Thomas's Hospital	38.3%
King's College Hospital	34.6%
Princess Royal University Hospital	9.1%
Queen Elizabeth Hospital	4.4%
Other hospital	7.1%
Home /elsewhere	6.4%
Total	100%

**Table 5** Number of increased births at each provider as a result of dispersal of births of Lewisham women

Increase	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
St Thomas's Hospital	1249	1266	1271	1267	1262	1253	1243	1235	1231	1227
King's College Hospital	1128	1143	1148	1144	1140	1132	1122	1115	1112	1108
Princess Royal University Hospital	298	302	303	302	301	299	296	295	294	293
Queen Elizabeth Hospital	145	147	148	147	146	145	144	143	143	142
Other hospital	230	233	234	234	233	231	229	228	227	226
Home /elsewhere	209	211	212	212	211	209	207	206	206	205

**Table 6** Projected numbers of births at SE London providers if births to Lewisham women are dispersed.

	total 2010-11	projected totals		
		2014	2015	2020
St Thomas's Hospital	6849	8120	8116	8080
King's College Hospital	5835	6983	6979	6947
Princess Royal University Hospital	4291	4594	4593	4585
Queen Elizabeth Hospital	4266	4414	4413	4409

### **Conclusion**

The closure of the delivery units at Lewisham Hospital would result in large increases of numbers of births at St Thomas's and King's College Hospitals. These increases would require a double obstetric rota at St Thomas's at a very early stage and for the foreseeable future. Lewisham women have, for years now, chosen these hospitals as their preference if they have decided not to have their baby delivered at Lewisham Hospital. There is no reason to believe that they will vary from this preference, or that they will move in large numbers to QEH, should the delivery units at Lewisham Hospital close. These changes will put intolerable pressure on St Thomas's and King's and will almost certainly require a double obstetric rota at St Thomas's. This fact, together with all the other disadvantages of Option 1, means that this option for the future of maternity services for Lewisham women must be rejected.

**Donal O'Sullivan**  
**Pauline Cross**  
**Meic Goodyear**

**12 December 2012**