



Royal College
of Midwives

Guernsey

state of
maternity
services
2024

Executive summary

Guernsey's maternity services help women give birth to around 500 babies each year.

Although this number has remained relatively stable in recent years, the profile of mothers has begun to change. The age profile of mothers is getting older: mothers in Guernsey are, for example, twice as likely to be aged 30 or older than under 30. In a switch compared to just a few years ago, mothers are more likely to be overweight or obese than to have a weight in the healthy range.

These demographic changes present a challenge to the island's maternity services, especially if the trends continue and if they represent a broader pattern of demographic change.

On a more positive note, the island's maternity services and wider public health measures mean that only a small minority of mothers smoke, and that share is slowly edging downwards too.

Babies are also very likely to receive breastmilk within the first 48 hours of life, something that is very positive for the baby's health and which represents a much higher figure than is seen in England. The proportions of women who receive a prenatal pertussis (whooping cough) vaccination and a flu vaccine during pregnancy are respectively at around 80% and 60% in Guernsey, compared to 58.6% and 31.2% in England.

These examples demonstrate the positive contribution that can be made by healthcare services, and specifically maternity services, in the improvement of public health. We would welcome the collection of more data that would demonstrate the value and impact of the work of midwives and others.

The midwifery workforce has a good age profile balance, with as many midwives aged in their early forties or younger as there are midwives in their late forties or older. That is a positive, for example, for succession planning.

Being around 75 miles from the British mainland, with weather-dependent transport links, this can present very real challenges to the safe delivery of maternity and other health services, as well as other aspects of life. The island's maternity services are supported through links with the Thames Valley and Wessex Neonatal Network in England, allowing for transfers when necessary, which is usual to travel by air in an emergency. Even with that support, however, the planning and coordination of services within a small healthcare system can be challenging.

Additionally, Guernsey supports labour and birth for pregnant women living on Alderney, 20 miles from Guernsey, which adds to the complexity of the service. There are no labour ward facilities in Alderney and therefore all births are planned to occur in Guernsey. Due to the potential for issues to arise with transport when a woman is in labour, such as inclement weather causing flight cancellations, families are offered the opportunity to stay in Guernsey from 37 weeks gestation, but this is negotiated on an individual basis. Maternity services support families to access accommodation and other logistical needs where required.



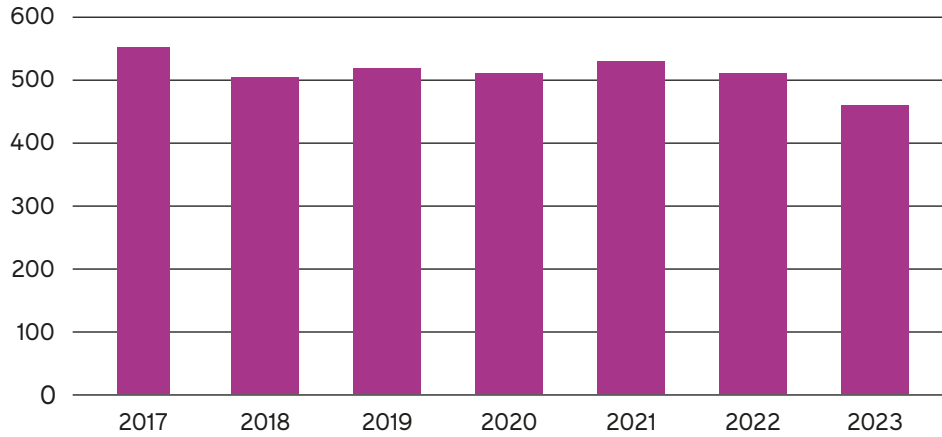
The RCM seeks a continued commitment from the Bailiwick to invest in maternity services in Guernsey, ensuring the island employs enough midwives to deliver sustained and sustainable improvements in maternity care and public health. Such investment would mitigate the impact of the changing profile of women using maternity services on the island, while delivering continued improvements in public health too.

Mothers are twice as likely to be aged 30 or older than under 30. Mothers are more likely to be overweight or obese. These changes present a challenge to the island's maternity services.

Births in Guernsey and the age profile of mothers

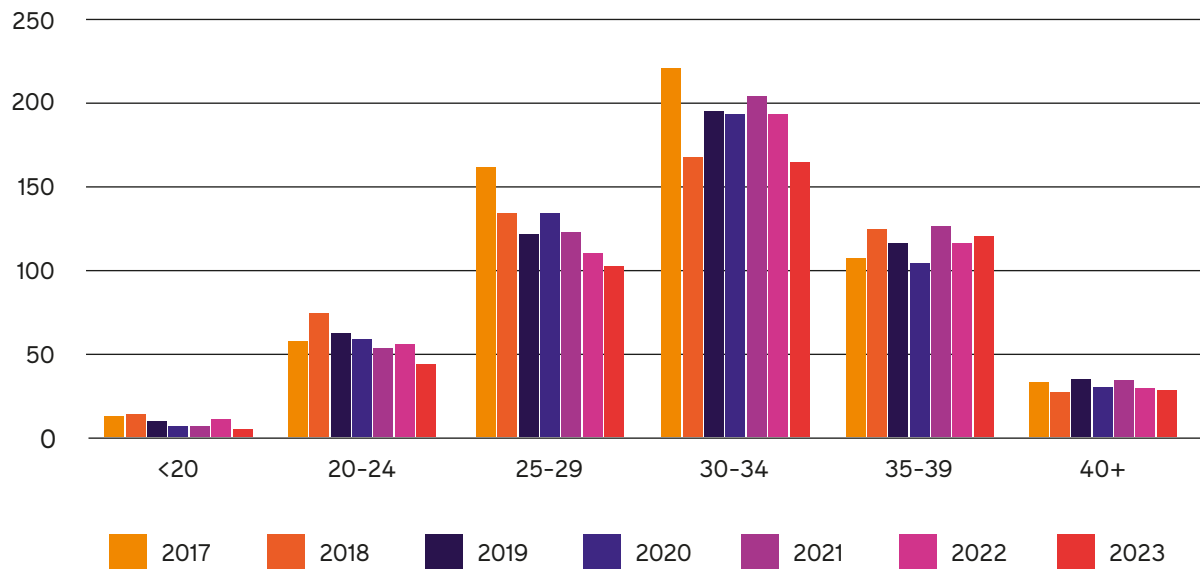
Number of babies born in Guernsey, 2017-2023

(source: Guernsey maternity services)



Number of births by age of mother, 2017-2023

(source: Guernsey maternity services)



Births in Guernsey

Around 500 babies are born in Guernsey each year. Of these, a small number – most recently, in 2023, 17 babies – are born to women resident on Alderney. While these numbers have remained relatively stable over recent years, there have been important demographic changes that have added to the midwifery workload.

The age profile of women using maternity services is changing. Between 2017 and 2023, the proportion of births to women between 25 and 29 fell from 27% to 22%, while the number to women between 35 and 39 rose from 18% to 26%.

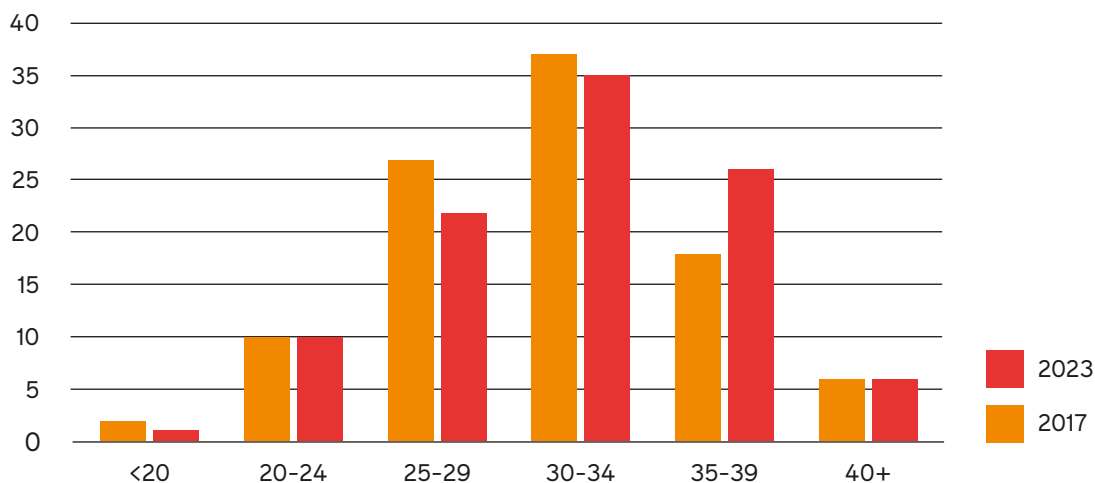
In 2023, a woman giving birth on the island was twice as likely to be aged 30 or older (311 births) than she was to be aged under 30 (151 births).

This ageing profile has also been seen in the United Kingdom, though even the most recent figures for England and Wales (for 2022) show just 59% of births taking place to this older age group, contrasting with 67% in Guernsey.

While people in their late thirties are by no means old, women who give birth later in life are more likely to encounter complications. This includes the age groups where births are increasing in Guernsey. The shift in the age profile and the additional complexity that brings inevitably increases the workload for the island's maternity service and therefore has staffing implications for the number, and training, of midwives working in it.

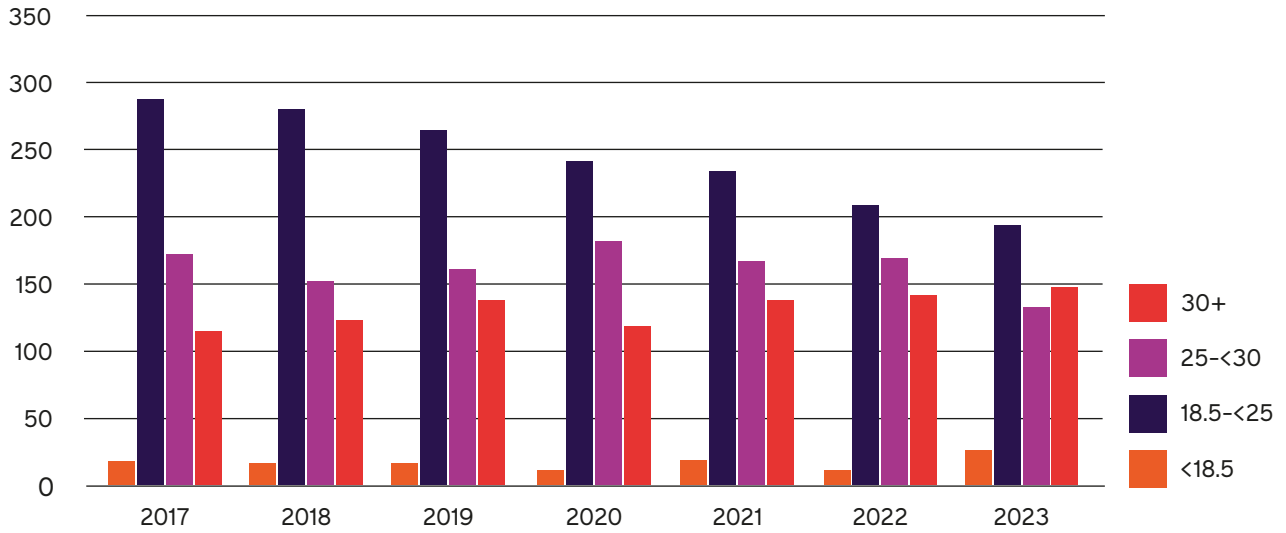
% of births by age of mother

(source: Guernsey maternity services)



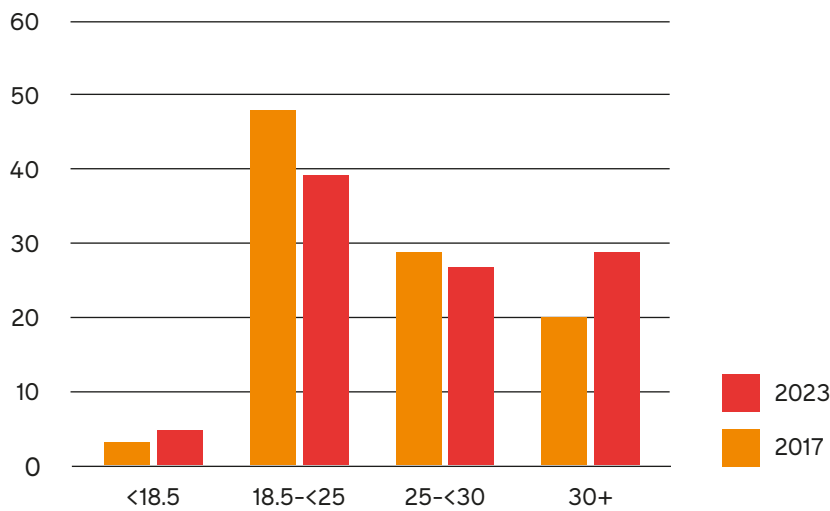
Births to women by BMI category

(source: Guernsey maternity services)



% of mothers by BMI

(source: Guernsey maternity services)



Another demographic change that impacts on the workload placed on maternity services, and which can be hidden by simply looking at the headline number of births, is the Body Mass Index (BMI) of women giving birth. Women with a higher BMI may experience greater complexity in pregnancy and their health, and that of their baby, may be at higher risk. As such, they may require additional support during pregnancy.

Women whose weight was in the healthy range (a BMI of 18.5 to 25) were the largest group in Guernsey, both in the most recent (2023) figures, and in 2017. But there has been a sharp drop in the proportion of pregnant women in this group, down from almost half (48%) in 2017 to almost two in every five (39%) in 2023.

The rise has been in women who are obese (a BMI of 30 or above), up from one woman in five (20%) in 2017 to almost one woman in three (29%) in 2023. In a change from 2017, pregnant women in 2023 were more likely than not to be overweight or obese, with obese women now the second-largest group after women with a healthy weight.

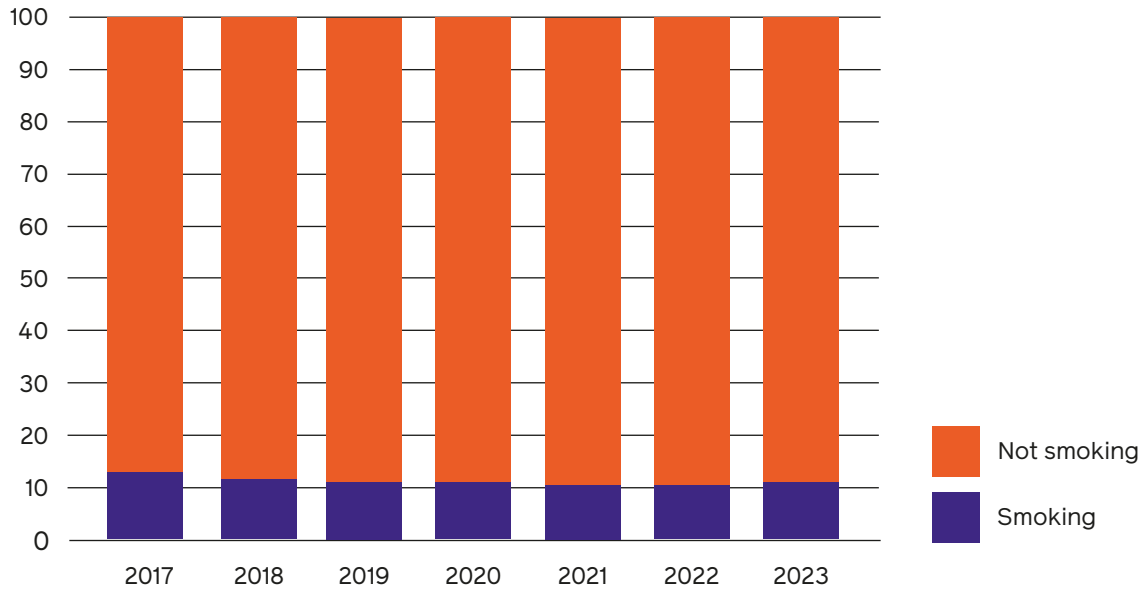
The need to address rising BMIs in Guernsey has been acknowledged by the Bailiwick's Healthier Weight Strategy, which the RCM welcomes. We now ask that this recognition is extended to maternity services on the island.

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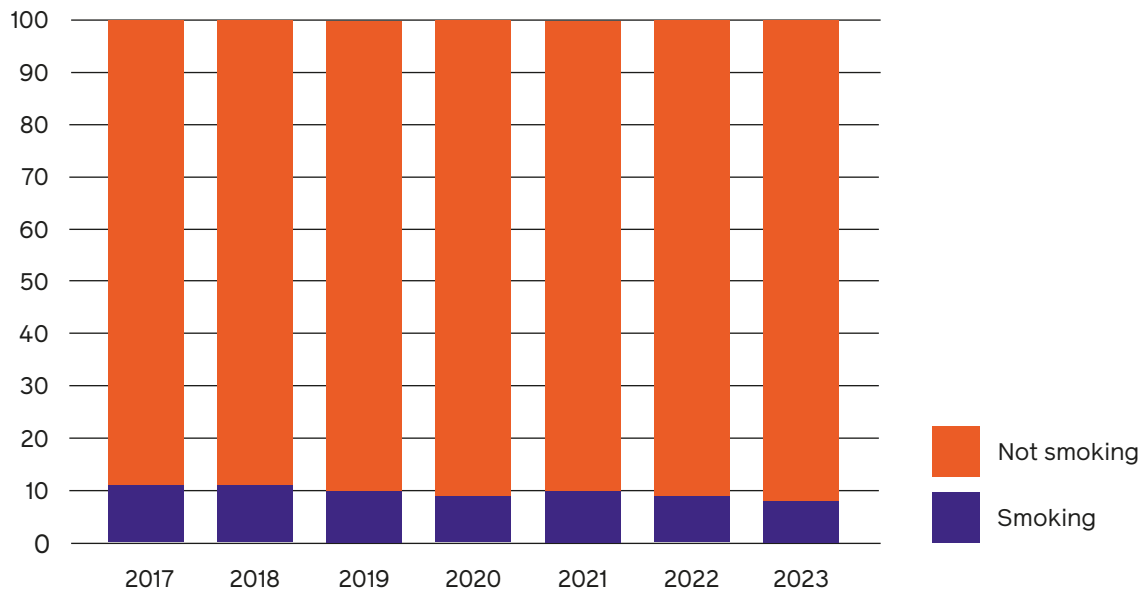
% of pregnant women smoking at time of booking

(source: Guernsey maternity services)



% of pregnant women reporting to be smoking at point of delivery

(source: Guernsey maternity services)



Pregnancy is a period when women, often along with partners and families, are more open to information about how to live healthier lives. This moment comes early enough in life that changes to bad habits can limit long-term damage to health. The relationship between a woman and her midwife means that midwives have a vital role to play in improving public health.

Encouraging pregnant women to stop smoking is an example of the kind of change that can add to the length and quality of a person's life, and massively reduce health risks to babies. In Guernsey, midwives have more face-to-face time than their colleagues in the UK to spend with women and support them to make healthier choices about their lives, such as quitting smoking.

Thankfully, the prevalence of smoking among pregnant women in Guernsey is low, and has edged lower over recent years, from 13% in 2017, to 12% in 2018, to 11% in 2019, where it has stayed since then. It is positive that prevalence is slightly down and has been held down since 2019. The opportunity of pregnancy to encourage healthier habits could help reduce this further in future years. The 'opt out' process for smoking cessation, implemented in 2017, ensures service users who smoked are automatically referred to smoking cessation services unless they decline this. CO monitoring is embedding into the antenatal pathway and a



number of different smoking cessation offers have been trialled, including the provision of smoking cessation support by midwives. Smoking cessation is also offered to partners and other household members of the pregnant service user.

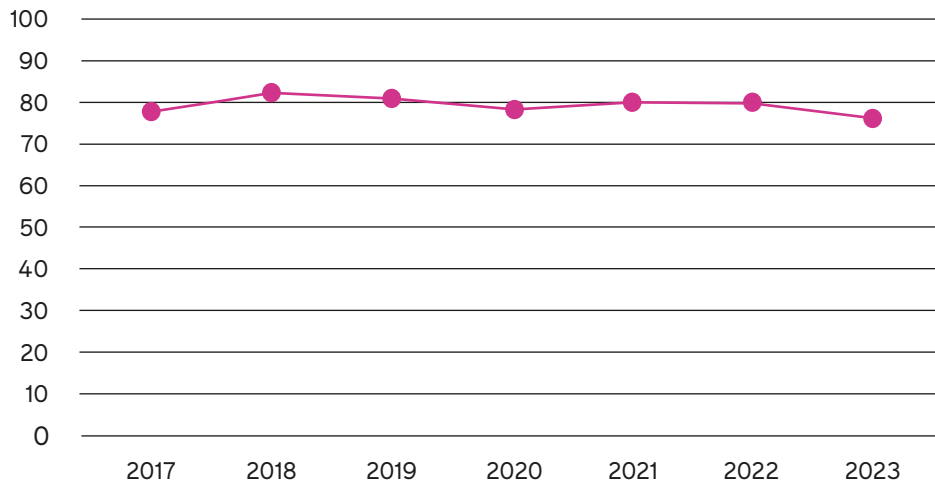
However, it has been difficult to engage with the small number of service users who do smoke during pregnancy. This concern is recognised within the Bailiwick's Combined Substance Use Strategy which contains a KPI of a reduction in the prevalence of smoking in pregnant women measured at both booking and delivery. While this is welcomed by the RCM, we would like to see more support for maternity services to bring the numbers down yet further.



Breastfeeding rates for women using maternity services

% of babies who received breastmilk in the first 48 hours of life

(source: Guernsey maternity services)



Breastfeeding rates in Guernsey are significantly better than those in England. Around four in every five Guernsey babies receive breastmilk in the first 48 hours of life, compared to around two-thirds (68%) in England.

It would be helpful to continue to monitor rates beyond this initial stage as rates do tend to drop away, for example the latest breastfeeding rate for England at six to eight weeks after birth stands at just over half (53.7%) (source: Breastfeeding Statistics¹).

Data is gathered on how an infant is feeding at time of discharge from midwifery services at around 10 days post birth. This data demonstrates a drop in the number of infants receiving breastmilk at that point in time, however women continue to be provided breastfeeding support after this point in time and anecdotal evidence suggests that some women who report not breastfeeding at this point in time do go on to successfully breastfeed. Work is ongoing to ensure data around breastfeeding prevalence at later points in time is recorded consistently to enable accurate data reporting.

Breastmilk is an excellent, healthy choice and a good breastfeeding rate is good news for public health. However, if after being given appropriate advice, information and support on breastfeeding, women who choose not to breastfeed will always be respected and supported.

¹www.gov.uk/government/collections/breastfeeding-statistics

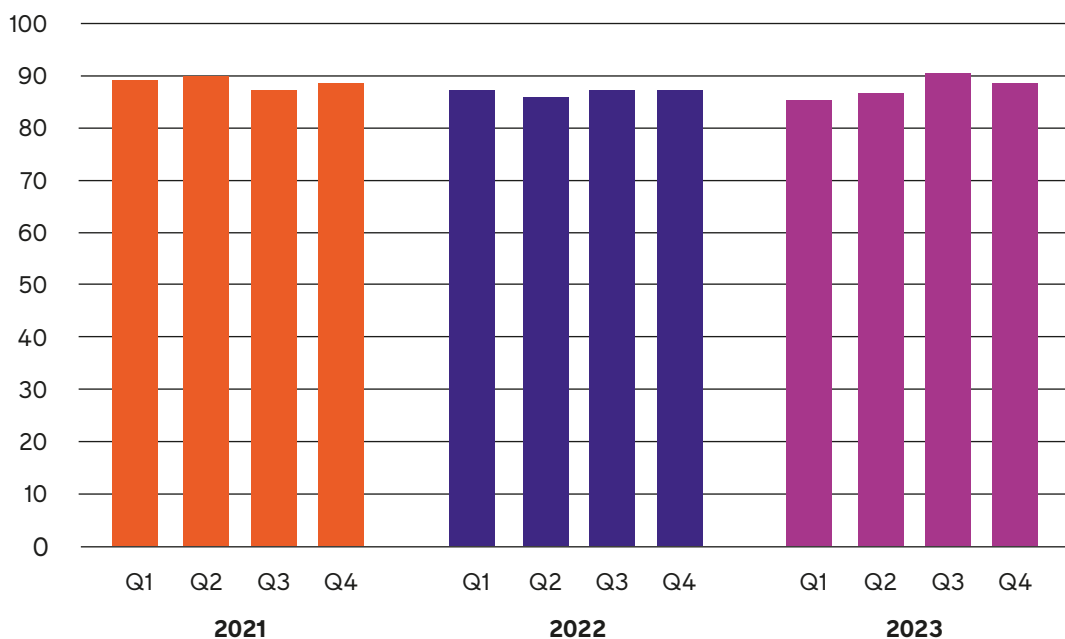




Vaccination rates for pregnant women

Proportion of pregnant women in Guernsey who received the prenatal pertussis vaccination

(source: Guernsey maternity services)



Just as breastfeeding initiation rates are better in Guernsey than in England, prenatal pertussis vaccination rates are better on the island than on the British mainland. In Guernsey, the proportion of pregnant women vaccinated has in recent years consistently been almost nine in every 10 women. This contrasts with just under six in every 10 in England (source: UK Health Security Agency²)

Unlike in the rest of the UK, where many vaccinations are delivered through primary care, within the Bailiwick vaccination services are delivered through maternity services.

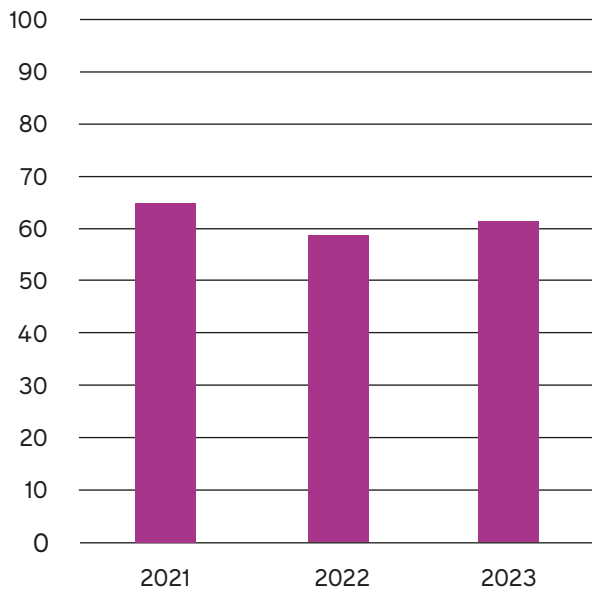
² <https://www.gov.uk/government/publications/pertussis-immunisation-in-pregnancy-vaccine-coverage-estimates-in-england-october-2013-to-march-2014>



Flu vaccination rates

% of pregnant women who received a flu vaccination

(source: Guernsey maternity services)



Pregnant women stand a higher risk of developing complications if they catch flu, and young babies have a higher risk of getting seriously ill if they get it. Having flu increases the chances of pregnant women and their babies needing intensive care.

Around three in every five pregnant women in Guernsey are vaccinated against flu, which is around double the vaccination rate in England, where just 32% of pregnant women were vaccinated against flu in the 2023/24 winter season (source: UK Health Security Agency³).

³ www.gov.uk/government/statistics/seasonal-influenza-vaccine-uptake-in-gp-patients-winter-season-2023-to-2024/seasonal-influenza-vaccine-uptake-in-gp-patients-in-england-winter-season-2023-to-2024

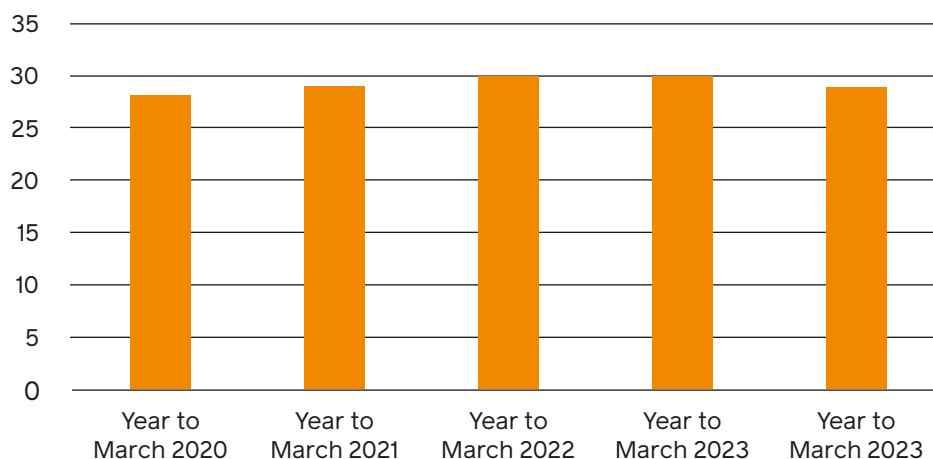


Midwives in Guernsey

Numbers and age profile of midwives

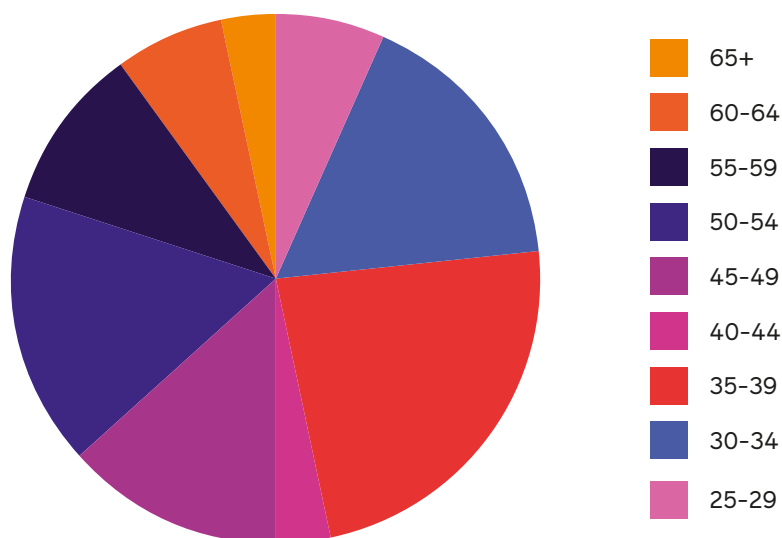
Average number of midwives (headcount)

(source: Guernsey maternity services)



Age profile of midwives in Guernsey (April 2024)

(source: Guernsey maternity services)



Overall, the number of midwives working in Guernsey has been pretty steady, at or just under 30 in each year since 2020.

Guernsey does not train its own midwives, so every midwife working locally is either an island resident who trained elsewhere and returned home, or is someone who has been drawn to the island. Midwives have also been supported in their continuing professional development and are offered financial and other support to move to and establish their lives in Guernsey. This makes it an attractive place to work too.

Succession planning is aided by an even distribution across the age profile of the midwifery workforce on the island, with an exact 50/50 split between those aged 44 or younger and those aged over 44. Two in every five midwives was in their thirties in the most recent figures.

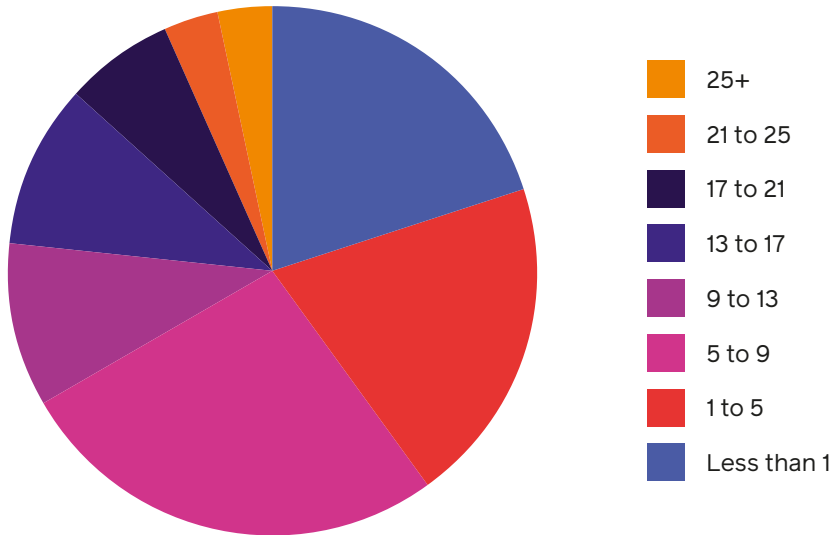
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Length of service of midwives

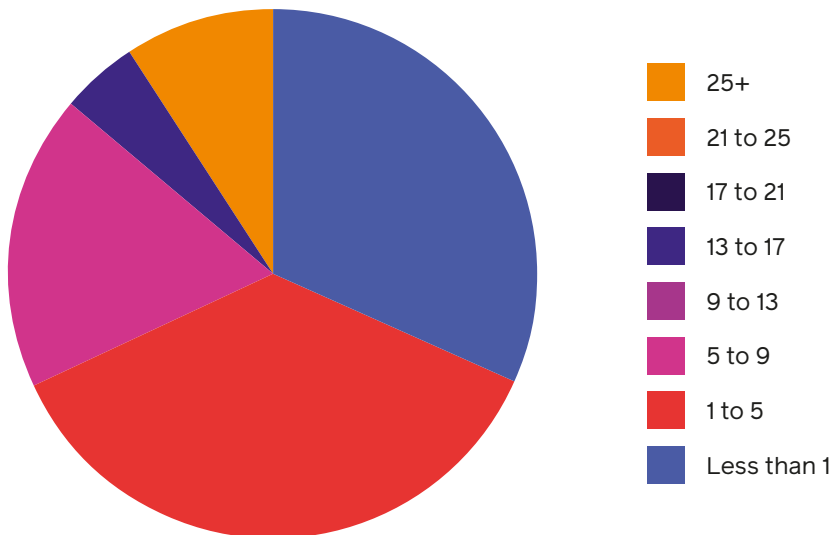
Midwives by years of service in Guernsey (April 2024)

(source: Guernsey maternity services)



Length of service of midwives who left in the five years to March 2024

(source: Guernsey maternity services)



The average length of service as a midwife in Guernsey was eight years in the latest snapshot (April 2024), with two-thirds having been a midwife on the island for under 10 years. Two had over 20 years' experience as midwives locally.

Retention of midwives is widely regarded as a measure of success in maternity services. The service benefits when the workforce understands it well, including its unique characteristics, and when midwives understand the local population and its needs well too. Three-quarters of those who have left the island's midwifery workforce in the five years to March 2024 did so after working as a midwife locally for five years or less, while 85% of those who left did so after less than a decade. While it is good for there to be some rotation in the workforce, bringing new perspectives and fresh learning into the service, it may be helpful to give some time to understand better why midwives may choose to leave the island and what measures might be put in place to retain experienced staff. We do know that the rent allowance and bonuses given to midwives are for four years. Once this term is completed, Guernsey is an expensive place to live. Childcare is very expensive and rental opportunities are limited for those with children and pets.



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Looking forward

Midwives have a fundamentally important role to play in improving public health, and those based in Guernsey have an impressive record of doing just that. Women on the island have a low and falling likelihood of smoking during pregnancy; a high proportion of babies receive breastmilk in the first 48 hours of life; and rates of prenatal pertussis and flu vaccination are also high.

Decision-makers in Guernsey have prioritised public health, and that should act as an inspiration to many services in the UK that compare less favourably on these indicators. The increase in the BMIs of pregnant women indicates that this focus should be extended to supporting islanders to maintain a healthy weight.

There is no doubt that midwives on the island have a strong role in delivering key public health outcomes, by helping women and families to make healthier choices still quite early in their lives, and helping babies get the best start in life. If the demographic changes that we are already witnessing continue, the service may need to work harder in the future to meet these demands. It is vital, therefore, that the Bailiwick invests in midwifery, ensuring that the island continues to have enough midwives who are able to spend time with women to have the conversations that make the difference.

Midwifery in Guernsey is an attractive option, with a service that works hard to recruit midwives and supports them in their roles with development opportunities. However, a significant number of midwives leave the island after a short time. In order to stem that flow, we need to understand why midwives leave, including whether the cost of living and availability and affordability of housing contributes to people leaving. We look forward to working with the States of Guernsey and many other stakeholders so we can ensure that the island is an affordable career option for those wishing to work in Guernsey maternity services.

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