

4 June 2021

Rt Hon Jeremy Hunt MP  
Chair, Health and Social Care Select Committee

By email

Dear Jeremy

Further to our written evidence and following a request from the Committee, we are writing to set out our thinking regarding the likely funding requirements for maternity workforce expansion.

Earlier this year, we estimated that between £250m - £400m was required to provide a 20% increase in the consultant obstetric workforce; a 3,000-person expansion in the midwifery workforce; and expansions in other professions which form part of the wider maternity team. We first suggested these figures to the Committee in a letter in February,<sup>1</sup> followed by another letter in March which contained the full rationale behind our position.

In April, the minister of state for patient safety, Nadine Dorries, provided new evidence from DHSC and HEE to model a smaller required expansion of 2,000 midwives. We understand this new figure has been supported by the RCM and other parties as an accurate level for required staffing, and as such we have revised down our estimated required funding level appropriately.

At the end of March, NHS England and NHS Improvement announced a £10.6m funding increase to the consultant obstetric workforce in 2021, and £46.7m to provide 1,000 more midwifery posts.<sup>2</sup> This funding is welcome. However, in our view, it falls short of – and does not cover all the staff groups in – our estimations for the cost of full expansion to the maternity workforce as a whole.

This funding was framed by NHS England and NHS Improvement as an “first step” to implementing the recommendations of the Ockenden report<sup>3</sup>, and in their Public Board meeting in March, there was recognition that further investment will be necessary in future years. Therefore we are hopeful that there may well be a commitment to recurrent funding to come, but as we have not yet seen this, trusts are currently having to operate on the basis that the funding is a one-off. We are aware of plans for HEE to define an appropriate

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workforce strategy, including immediate service level interventions. We await the outcome of this modelling, which may lead to a clearer indication regarding funding levels and recurrence.

Given that this work is ongoing, we will continue to lobby for what we know is needed to address the gaps in the maternity workforce. Based on the revised required expansion in the midwifery workforce we think an overall estimate of £200m - £350m is needed to properly address this area, but we shall of course be following the development of HEE's strategy, and any announcement of funding recurrence from NHS England and NHS Improvement.

I hope that this is helpful and provides the required clarity for our written evidence. Please do get in touch should you have further questions.

Yours sincerely

Chris Hopson

Chief Executive

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<sup>1</sup> <https://nhsproviders.org/media/690887/2021-02-04-letter-from-nhs-providers-to-hscc.pdf>

<sup>2</sup> <https://www.england.nhs.uk/wp-content/uploads/2021/03/agenda-item-9.1.1-national-response-first-ockenden-report.pdf>

<sup>3</sup> Ibid