

<b>Elected Members Briefing: Moray Maternity Services - Draft Model 4 Plan</b>	 The NHS Grampian logo, featuring the letters 'NHS' in a bold, blue, sans-serif font above a stylized blue wave graphic, with the word 'Grampian' in a smaller, blue, sans-serif font below it.
<b>Friday 1 July 2022</b>	



### **Overview**

On 30 March 2022, the Cabinet Secretary announced an intention to establish a consultant-led maternity unit (Model 6) at Dr Gray's Hospital, Elgin following the report produced by Ralph Roberts' review team in 2021.

In progressing to this model of service, it was further detailed that a networked Community Maternity Unit linked to Raigmore (Model 4) should be developed by December 2023.

NHS Grampian is fully committed to the development and implementation of the planned changes. Throughout our deliberations, patient safety and delivering a sustainable service have guided our plans.

This briefing provides an update on the draft Model 4 delivery plan in line with the Cabinet Secretary's expectation that this information will be shared with the Scottish Government during summer 2022. The draft Model 4 delivery plan will be provided to Scottish Government on 1 July 2022 following conversations with NHS Grampian staff and key local stakeholders, satisfying this deadline.

The proposed changes, encompassed within Model 4, will deliver greater patient safety and deliver maternity services closer to Moray in Raigmore Hospital while we develop the longer-term plan (Model 6) for the restoration of further services at Dr Gray's Hospital in Elgin.

### **Planning Update**

Delivery of Model 4 requires significant collaborative working between NHS Grampian and NHS Highland, in addition to co-ordination with staff and other health services. Additionally, the creation of this community network model will require the refurbishment of facilities at Raigmore Hospital, Inverness and the hiring of additional skilled clinicians, both of which are a pre-requisite to delivering services safely and sustainably.

As such, the joint plan commits to a series of deadlines for different services to be brought on-stream over the next eighteen months, with the intention of meeting the Cabinet Secretary's timescale for Model 4 to be fully operational by December 2023. Further planning to identify what is required to establish Model 6 will start immediately after the delivery of the draft Model 4 plan. This work will build on and be informed by the lessons learned while implementing Model 4.

The deadlines include:

- By Autumn 2022:
  - Scoping work on the flexibility of the existing workforce to deliver antenatal care as close to home as possible in a networked model
  - Scoping work on expansions to the antenatal day assessment provision
- By December 2023:
  - Upgraded and new facilities completed in Raigmore Hospital
  - Recruitment of additional staff in Raigmore Hospital to accommodate the extra births
  - Development of the Fetal Medicine service in Dr Gray's Hospital
  - Consider how we could develop a service that offers the choice for the women of Moray to have elective caesarean sections within Raigmore Hospital in the future.

### **The Moray Networked Model**

By December 2023 we anticipate that networked services with upgraded and new facilities at Raigmore Hospital and additional staff recruitment will ensure:

- Women in Moray will be able to choose between:
  - Midwife-Led birth in Dr Gray's Hospital;
  - Midwife Led birth in Aberdeen Maternity Hospital;
  - Midwife-Led birth in Raigmore Hospital;
  - Consultant-Led birth in Aberdeen Maternity Hospital;
  - Consultant-Led birth in Raigmore Hospital;
  - Home birth
- Antenatal care that is delivered mainly by Midwives, but supported by consultants in Dr Gray's Hospital, Aberdeen Maternity Hospital and Raigmore Hospital, subject to scoping flexibility of the existing workforce at Raigmore to deliver this.
- Maternity Triage 24 hours a day delivered by Midwives.
- Care closer to home in Moray for women who require input from a Fetal Medicine Specialist.
- Expanded Antenatal Day Assessment supported by obstetricians.
- Reduced travel to Aberdeen for antenatal care
- Midwife-Led births in Dr Gray's Hospital based upon a nationally recognised, evidence based Midwife Led model of care where all women with intrapartum complications transfer to the nearest consultant unit in Raigmore Hospital. Tertiary support will also be available in Aberdeen Maternity Hospital if required.
- A choice of Consultant Led births in Aberdeen Maternity Hospital or Consultant Led births in Raigmore Hospital.

The planning document also identifies potential constraints to achieving the December 2023 deadline:

- Recruitment of the additional staff required at both Dr Gray's and Raigmore in order to implement Model 4.

- The way Raigmore is refurbished to make it a safe and comfortable place for women and their families.

#### **Elective Caesarean Sections Under Model 4**

The Ralph Roberts' Review recommended that under the Moray Networked Model (Model 4) patients have access to consultant-provided elective caesarean sections in Dr Gray's.

NHS Grampian clinical teams remain committed to providing the option for the women of Moray to have an elective caesarean section closer to home in Dr Gray's as soon as the infrastructure and workforce are in place to ensure it is safe to do so.

However, there is consensus amongst clinicians in NHS Grampian and vital delivery partners (e.g. the national neonatal transport service ScotSTAR) that staffing and infrastructure in Dr Gray's currently is not sufficient to make planned caesarean sections a safe part of Model 4 planning.

Some examples of elements that are required to deliver planned caesareans safely are:

- A robust tier of staff, resident 24 hours a day, who are competent to provide routine post operative care and identify post operative complications including supporting the midwifery staff with the initial resuscitation of a woman, while awaiting senior medical help.
- Sufficient obstetric anaesthetists, anaesthetic assistants and other theatre staff to always allow safe timely access to theatre for women who require it, for the management of bleeding or other surgical complications.
- An on-site blood transfusion service to provide support in the management of a major haemorrhage during or after surgery.
- Access to on-site obstetric HDU facilities. Requires sufficient physical capacity and staff with relevant up to date knowledge and experience of caring for women in the immediate postnatal period.
- Access to on-site suitably staffed SCBU facilities to prevent separation of mothers and those babies who require additional care for some breathing difficulties which are more common in babies born by caesarean section.

Unfortunately, these elements listed above will not be available within the hospital infrastructure of Model 4.

We continue to work closely with colleagues at NHS Highland to create the option for Moray women to have an elective section at Raigmore Hospital in Inverness and it remains our objective that this will be delivered under Model 4 planning provided the staffing and infrastructure is in place at Raigmore.

As you will be aware, given the additional capacity requirements required at Raigmore Hospital to safely manage the increased level of service provided to women in Moray this will be dependent upon appropriate workforce and capital investment in NHS Highland.

Despite these challenges, the delivery of an obstetric-led service at Dr Gray's remains a key priority for NHS Grampian. We continue to explore all options to accelerate the planning, investment and recruitment needed to move to a Model 6 service and the safe return of a consultant led maternity service in Moray.

### **Next Steps**

As part of the finalisation of the draft plan, it has been shared with the maternity workforce, the Maternity Voices Partnership and Keep Mum, and further consultation will take place with both staff representatives and other stakeholders during the implementation phase for Model 4 and the planning for Model 6.

The draft plan will be formally submitted to the Scottish Government on 1<sup>st</sup> July, with a Scottish Government response expected following their formal review of it.

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