

## **Major Service Change**

A report on NHS Grampian's Consultation on proposed changes to the Maternity Service in Grampian

**Summary Report** June 2012



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## 1 Summary

- 1.1. NHS Boards need to work with patients and local communities when changes to a health service are being considered. The Scottish Government issued guidance in February 2010, entitled 'Informing, Engaging and Consulting People in Developing Health and Community Care Services', to assist NHS Boards in their engagement with local people on the delivery of healthcare services. When a service change is considered by the Scottish Government to be 'major', the Scottish Health Council produces a report assessing whether the relevant NHS Board has involved people in accordance with the expectations set out in the guidance.
- 1.2. This report on NHS Grampian's process for involving local people in the review of maternity services outlines our approach to quality assurance, charts our communication with NHS staff in relation to the engagement and consultation process and highlights the issues raised by local people during the engagement and consultation process.
- 1.3. NHS Grampian's consultation on proposed changes to maternity services is part of its wider review of maternity services which began in April 2010. NHS Grampian undertook an option appraisal in spring 2011 to discuss the configuration of services with clinicians, managers and public representatives. Formal consultation took place between 11 December 2011 and 22 March 2012. The Board's preferred option is to retain home births, close the three Birthing Units (Banff not currently operational, Fraserburgh and Aboyne) and replace them with two Community Maternity Units (Peterhead and Inverurie) in Aberdeenshire with the introduction of more consultant outreach and scanning in localities. The services at Elgin would remain unchanged. Although not part of this consultation longer term aims are to relocate Aberdeen Maternity Hospital within the Foresterhill site and the Midwife Led Unit at Aberdeen Maternity Hospital would be developed into a Community Maternity Unit.
- 1.4. The current service model includes home births, three Birth Units (Banff not currently operational, Fraserburgh and Aboyne), the Aberdeen alongside Midwife Led Unit at Aberdeen Maternity Hospital, the Specialist Unit at Aberdeen Maternity Hospital and the Consultant Unit in Dr Gray's Hospital, Elgin. NHS Grampian also provides specialist care to women from Orkney, Shetland, Highland and Tayside NHS Board areas.
- 1.5. A Maternity Services Leadership Group was established for the maternity review with three public representatives and this group helped to plan the option appraisal and the consultation process.
- 1.6. An improvement event known as a 'Value Stream Analysis' (VSA) was held in August 2010 with staff, public representatives and neighbouring NHS Boards. The outcomes from the event included the draft maternity strategy and the decision to undertake the option appraisal on the configuration of services. Other workstreams which would not require public consultation were also identified.
- 1.7. The consultation on NHS Grampian's draft strategy for maternity services 2010-2015 was carried out between October and November 2010. This raised the awareness of the challenges facing maternity services, and enabled NHS Grampian to add groups with an interest in maternity services to their contacts database which provided a foundation for the later consultation on the configuration of services.

- 1.8. After the option appraisal NHS Grampian carried out further work during May and June 2011 with clinicians, managerial staff and public representatives to consider potential locations for the Community Maternity Units in Aberdeenshire. The group recommended Peterhead and Inverting as the best locations for the two units.
- 1.9. NHS Grampian's Board reviewed the results of the option appraisal and agreed to consult on the preferred option in December 2011. NHS Grampian stated in its consultation paper that although it had a preferred option it would consider alternative suggestions that were put forward during the consultation process.
- 1.10. A range of methods were used to gather the views of women, staff, the public and other interested parties during the consultation including; a survey, open meetings, discussion groups with women and families, responses (email and letter), staff briefings, presentations to key NHS staff and local authority groups and committees and meetings with MPs, MSPs, and local councillors.
- 1.11. The main issues raised at most of the meetings related to intrapartum care (management and delivery of care to women in labour) and especially in those areas where the Birth Units were being considered for closure. There was also discussion about parts of the maternity review that were not the subject of the consultation: for example, NHS Grampian's routine transfer of care policy and how it is applied.
- 1.12. The Scottish Health Council quality assured the process followed by NHS Grampian using a variety of methods, for example:
  - attendance at Maternity Service Leadership Group meetings, the option appraisal workshops and at the open meetings organised by NHS Grampian
  - evaluation with the public representatives who took part in the option appraisal and joint evaluation of the open meetings
  - asking for people's views on the Board's engagement and consultation process via questionnaires, telephone interviews and discussions with groups
  - reviewing NHS documents relating to the service change.
- 1.13. The Scottish Health Council is satisfied that NHS Grampian has followed the Scottish Government's guidance<sup>1</sup> on involving local people in service change.
- 1.14. The Scottish Health Council acknowledges the work undertaken by NHS Grampian in conducting this engagement and consultation and the range of methods it has used to engage with people.
- 1.15. NHS Grampian has expressed its commitment to continuing its involvement of service users and communities across Grampian in the implementation of the proposals if the preferred option for service change as set out in the consultation is approved. This would be particularly important in areas where concern has been expressed about the potential impact of closing existing facilities.

<sup>&</sup>lt;sup>1</sup> Informing, Engaging and Consulting People in Developing Health and Community Care Services, CEL 4 (2010), The Scottish Government, 10 February 2010. In this report, the phrase 'the guidance' shall refer to this Chief Executive Letter (CEL).

- 1.16. We recognise the efforts made by NHS Grampian to support and involve the public in the option appraisal process. Several aspects were particularly helpful the guide to option appraisal, the table with specific examples of what the criteria meant, and the midway evaluation with the public representatives. We recommend sharing these aspects within NHS Grampian and with other NHS Boards to consider implementing in future option appraisal processes.
- 1.17. NHS Grampian used the learning from a previous consultation on maternity services in 2006 to inform its approach to this consultation, and ensured that service users who had been involved in the previous process had opportunities to be involved again.
- 1.18. NHS Grampian engaged with the Scottish Health Council at an early stage in its process. It invited us to attend the Maternity Services Leadership Group meetings to advise on the engagement process and has been responsive to feedback we have provided throughout the process. This has resulted in good and continuing communication between the organisations.
- 1.19. Some of the public representatives who had been involved in the option appraisal attended the open meetings in their own area. The Scottish Health Council felt this was helpful in explaining the public representatives' role in the process and their perspective on the proposals.
- 1.20. The Scottish Health Council has identified the following learning points:
  - NHS Grampian should consider the terminology used in consultation papers to
    describe the consultation methods that will be used in order to ensure that this
    is clear. Public feedback mentioned that the term 'open meetings' led to some
    confusion about who could attend these meetings.
  - Reflecting on the public feedback we have received, NHS Grampian may wish to
    consider how it uses social media to raise awareness of its consultations. We note
    that NHS Grampian used its Facebook and Twitter pages, however in this situation it
    may have been more effective to have posted links on relevant online forums, such
    as 'Netmums', directing people back to the NHS Grampian website and the online
    survey.
- 1.21. This report was submitted to NHS Grampian for consideration at its Board meeting on 12 June 2012, where the Board will consider the outcome of the consultation process. Following discussion and a decision, NHS Grampian will make a submission to the Cabinet Secretary for Health and Wellbeing for Ministerial approval. In the submission, the Board should demonstrate how it has taken into account the suggestions and concerns that arose during the consultation.



**Scottish Health Council National Office:** Delta House | 50 West Nile Street | Glasgow | G1 2NP **Telephone** 0141 241 6308 www.scottishhealthcouncil.org

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