

Meeting: NHS Grampian Board

Meeting date: 8 October 2026

Item Number: 9.5

Title: Dr Gray's Hospital Update

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1 Purpose and Recommendations

This report is presented to the Committee for:

- Assurance

Recommendation(s)

The Board is asked to:

- Review and scrutinise the information provided and receive assurance that the issues identified through internal review, external engagement and governance scrutiny are being incorporated into the wider improvement programme for Dr Gray's Hospital.
- Request a further update through the appropriate Board governance route on the outcome of the paediatric surgery assessment and any resulting recommendation on service reinstatement.

This report relates to:

- NHS Grampian Strategy: Plan for the Future – Pathways and People
- Board Annual Delivery Plan – Clinical Quality and Safety

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective
- Person Centred

The subject matter of this report is relevant to the mitigation of the following strategic risks (further information provided in the Risk section below):

- Deviation from recognised service standards of practice and delivery

2 Report summary

2.1 Situation

NHS Grampian recognises the importance of keeping the Moray community informed through open and transparent communication about developments at Dr Gray's Hospital. We acknowledge the concerns expressed by local people about paediatric surgery and maternity services and reaffirm our commitment to restoring safe and sustainable paediatric surgical services and delivering Model 6 Maternity.

This report provides the Board with an update on:

- the Cabinet Secretary for Health and Social Care's visit to Dr Gray's Hospital and the commitments relating to paediatric surgery and Model 6 Maternity;
- progress towards reinstating paediatric surgery by the end of December 2026, including the required engagement with Healthcare Improvement Scotland;
- changes to the hospital's senior leadership arrangements;
- the visit by the Patient Safety Commissioner for Scotland;
- the NHS Grampian Assurance Board meeting held at Dr Gray's Hospital on 22 September 2026;
- the continuing programme of clinical governance improvement;
- actions underway to improve and optimise planned care and unscheduled care at the hospital; and
- progress with the Ward 4 ligature reduction works.

2.2 Background

Dr Gray's Hospital is an essential part of NHS Grampian's acute hospital network and health service provision for the population of Grampian. NHS Grampian is committed to open, transparent and timely communication with the local community, recognising the understandable concern about changes to paediatric surgery. The organisation remains committed to restoring paediatric surgical activity safely and sustainably and to delivering the full Model 6 consultant-led maternity services. A programme of work is underway to strengthen hospital leadership, clinical governance, communication, staff engagement and alignment between services delivered across Elgin and Aberdeen. Focused clinical governance activity since April 2026 has improved senior and operational engagement, oversight of adverse-event reviews and hospital-level governance arrangements. Further work is required to embed consistent service-level governance, clarify responsibilities for cross-site services and align local arrangements with the wider NHS Grampian clinical quality and safety system. A separate report on today's agenda details ongoing work relating to restoring consultant-led maternity services at Dr Gray's Hospital.

2.3 Assessment

Cabinet Secretary visit

The Cabinet Secretary for Health and Social Care, Angela Constance, visited Dr Gray's Hospital on 25 August 2026, accompanied by Laura Mitchell MSP. The visit included a walk round the Emergency Department and the maternity ward. This enabled discussion with frontline teams about current challenges, safe and sustainable services, workforce, training, facilities and equipment. During the visit, NHS Grampian reaffirmed its

commitment to reinstating paediatric surgery at Dr Gray's Hospital by the end of December 2026 and to delivering Model 6 maternity services. The separate report on today's agenda highlights that delivery on restoring full consultant-led maternity services is progressing, however current recruitment challenges place the delivery timeline of December 2026 at risk.

Paediatric surgery

Current position

Following clinical and governance concerns identified through internal governance processes and by Healthcare Improvement Scotland, paediatric surgical activity at Dr Gray's Hospital was paused except for tightly defined time-critical emergencies. Outpatient, ambulatory and inpatient paediatric care continues, together with Emergency Department assessment and stabilisation. Operative exceptions are acute testicular torsion and immediate surgery to control life-threatening haemorrhage or stabilise a child before transfer. A breach of this instruction was recognised and corrected. A commissioned investigation has been completed and will return to the Board with its findings and recommendations. In addition, revised arrangements for paediatric procedural sedation within the Emergency Department have been implemented as a precautionary measure while clinical pathways, workforce competencies and governance arrangements are reviewed and strengthened.

Assessment of reinstatement

Work is progressing against the agreed programme to reinstate paediatric surgical activity safely and sustainably by the end of December 2026. Multidisciplinary teams are finalising clinical pathways, eligibility criteria and arrangements between Dr Gray's Hospital and the Royal Aberdeen Children's Hospital. Training requirements have been identified and staff requiring initial or renewed training have been scheduled onto relevant courses locally and nationally, with associated costs funded. The programme also covers paediatric emergency and resuscitation competencies; anaesthetic, surgical, paediatric and theatre workforce; escalation, stabilisation and transfer; major haemorrhage and emergency response procedures; specialist advice; governance, risk and adverse-event review; communication; implementation assurance; and sustainability across staff groups and rotas. This provides assurance that the required work is actively progressing towards the reinstatement by December 2026. Delivery of this will be dependent upon a condition led assessment, as detailed below.

Current safeguards

Reviewed rotas and clinical procedures are in place. A staff member with Advanced Paediatric Life Support training is available on site at all times, and a dedicated first responder attends paediatric emergencies until the paediatric consultant is available. These safeguards support the defined emergency exceptions while the full set of requirements for wider reinstatement is completed.

Decision pathway

Paediatric surgical services were suspended because of recognised gaps in staff training credentials rather than adverse clinical outcomes. Completion and assurance of the required training, clinical pathways, workforce, emergency response and governance arrangements are prerequisites for reinstatement, and are being actively progressed. NHS Grampian will engage with Healthcare Improvement Scotland on the evidence and proposed arrangements to allow a final decision on reinstatement. Reinstatement can only be confirmed as on track following that engagement and completion of the required assurance process.

Hospital leadership arrangements

New General Hospital Manager arrangements provide continuity of senior operational leadership and renewed focus on hospital-wide operational oversight, improvement delivery, staff visibility and engagement, cross-site accountability, clinical governance and escalation, and partnership working. As part of the changes to senior leadership arrangements, the Hospital Chief Nurse role is being separated from the current dual role across the hospital and Moray Health and Social Care Partnership, with recruitment underway. This will provide dedicated senior nursing leadership and support clinical governance, staff development and hospital-wide quality and safety improvement. A Deputy Chief Nurse has also been appointed to strengthen leadership. The on-site medical leadership arrangements are also under review. The Unscheduled Care Improvement Director is now a system role, which includes spending time at DGH as well as ARI to lead improvements.

Patient Safety Commissioner visit

The Patient Safety Commissioner's visit provided an opportunity for direct engagement with patients, staff and hospital leaders across the hospital. The feedback from the Patient Safety Commissioner noted her concerns in relation to the pressures and demands faced by the hospital, including high hospital occupancy levels, lengthy ambulance waits, use of surge areas and non-standard patient areas. These will be addressed through the existing Unscheduled Care Improvement Plan for Dr Gray's and the Patient Safety Commissioner will be kept updated on progress in this area. Following the visit, the Patient Safety Commissioner emphasised the importance of staff being able to speak up safely, being listened to and seeing clear action and feedback in response to concerns. Actions underway include reinforcing professional and organisational speaking-up routes, reviewing Speak Up support at Dr Gray's Hospital, widening opportunities for staff to raise issues and connecting the themes from the visit to the clinical governance improvement programme. NHS Grampian has also reinforced that staff who raise concerns should be supported and must not experience adverse consequences for speaking up.

NHS Grampian Assurance Board

The NHS Grampian Assurance Board met at Dr Gray's Hospital on 22 September 2026. Scottish Government colleagues visited clinical areas and met local teams, providing direct insight into the hospital's operating context. The meeting focused on leadership and culture, planned care recovery, unscheduled care performance and improvement, frailty

implementation, and financial performance. Holding the meeting on-site in Elgin enabled Assurance Board members to engage directly with local leadership and staff and developed a fuller understanding of the locality, travel distances, geography and the particular workforce, capacity and service-delivery challenges facing Dr Gray's Hospital.

Clinical governance improvement

The revised hospital Clinical Governance meeting is intended to improve information escalated from services, strengthen consideration of safety and quality, allocate actions clearly and improve feedback and escalation into Acute Sector governance. Work includes regular on-site clinical governance support, reduction and oversight of Significant Adverse Event Review activity, standardised Terms of Reference and meeting arrangements, engagement with clinical and operational leaders, education on governance and Duty of Candour, and development of clearer responsibilities and escalation routes for cross-site services. The overall direction is positive, but further work is needed on consistent service-level arrangements, medical attendance, cross-site accountability and sustainable resourcing.

Ward 4 ligature reduction works

Phase 1 enabling works for the Ward 4 ligature reduction programme commenced in July 2026. Phase 1 is expected to complete by the end of November 2026.

The procurement process for the Phase 2 main works contract has been completed. Following approval, mobilisation and commencement on site are expected in January 2027. The works will be undertaken within a live clinical environment and will require close coordination with clinical teams to manage the impact on ward operations, patient safety and bed capacity. A weekly Project Team is in place, with a direct reporting route to the Ward 4 Ligature Event Response Coordination Group, to support programme oversight and risk management.

Overall assessment

The immediate paediatric surgical position is controlled through defined restrictions, reviewed clinical arrangements and 24-hour paediatric life-support cover. The programme required for reinstatement is progressing, with pathways, workforce training, emergency-response arrangements and governance requirements being completed against the end of December 2026 ambition. Leadership capacity has been strengthened, focused clinical governance work is established and external scrutiny is informing targeted improvement opportunities.

2.3.1 Quality / Patient Care

The pause of paediatric surgery limits local access to operative paediatric surgery for ear, nose and throat and dental surgery, and may require children and families to travel to Aberdeen. It provides a controlled safety measure while clinical, workforce and governance conditions are assessed. Continued outpatient, ambulatory and inpatient paediatric care, Emergency Department assessment and stabilisation, defined emergency exceptions, transfer arrangements and specialist support mitigate immediate risk. The

reinstatement assessment is explicitly conditions-led and will determine when a safe, sustainable future model can be supported.

Dr Gray's continues to have an important role in the improvement of waiting times for planned care, with additional elective activity taking place at weekends to reduce long waits for patients. Service planning across Grampian for orthopaedic services will be undertaken to improve service sustainability, this work is being supported by expertise from the East of Scotland Sub-National groups. Significant improvement work is underway in relation to unscheduled care with a 12 point improvement plan targeting improved flow and discharge of patients to ensure they receive the right care in the right place as quickly as possible. Dr Gray's Hospital is also running 'Optimise October' - a whole hospital and whole system improvement project with the aim to:

- Improve patient flow through the hospital.
- Reduce delays to assessment, treatment, admission and discharge.
- Minimise excessive waits for patients.
- Improve ambulance handovers and reduce pressure on the wider system.
- Create capacity through proactive discharge planning and operational management.
- Embed sustainable ways of working that remain in place beyond October.
- Deliver on the 12 point improvement plan.

2.3.2 Workforce

The improvement programme requires sustained input from paediatric, surgical, anaesthetic, theatre, nursing, management and governance staff across Elgin and Aberdeen. Leadership changes and recruitment to the Hospital Chief Nurse role are intended to strengthen visibility, professional leadership, engagement, governance and accountability. Listening activity and review of Speak Up support are intended to improve routes for staff concerns and feedback. Sustainability across relevant staff groups and rotas forms part of the reinstatement assessment. The Executive Team have committed to increasing their presence and visibility on site in order to support staff wellbeing and engagement, and to enable staff to raise suggestions or concerns so that these can be heard and actioned promptly.

2.3.3 Financial

There are no financial implications from this report.

2.3.4 Risk Assessment / Management

This work supports mitigation of the strategic risk 'Deviation from recognised service standards of practice and delivery'. The current restriction, defined emergency safeguards, multidisciplinary reinstatement assessment, strengthened clinical governance, adverse-event review oversight, clearer escalation and external assurance are measures to reduce this risk.

2.3.5 Equality and Diversity, including health inequalities

The assessment recognises the impact on children, young people and families in Moray, including travel to Aberdeen where local operative care is unavailable. Transfer and family-support arrangements form part of the assurance requested by the Cabinet Secretary. Any future service model should continue to consider equitable access and the effect of travel on families.

2.3.6 Communication, involvement, engagement and consultation

Open and transparent communication with the Moray community is central to the improvement response. Engagement has included visits and discussions with the Cabinet Secretary for Health and Social Care and the Patient Safety Commissioner for Scotland, liaison with Scottish Government officials through the Assurance Board, communication with the Scottish Ambulance Service and NHS Highland, and engagement with patients, families, frontline staff and local leadership. Continued community updates, staff listening, speaking-up support and clear feedback arrangements will remain part of the programme.

- Cabinet Secretary for Health and Social Care visit, 25 August 2026
- Patient Safety Commissioner for Scotland visit, September 2026

2.3.7 Route to the Meeting

The content draws on scrutiny and improvement work considered through Executive Team, the Clinical Quality and Safety Improvement Board, the Clinical Governance Committee and the NHS Grampian Assurance Board.

- Executive Team, 1 and 8 September 2026
- NHS Grampian Assurance Board, 8 September 2026

2.4 Recommendation(s)

The Board is asked to:

- Review and scrutinise the information provided and receive assurance that the issues identified through internal review, external engagement and governance scrutiny are being incorporated into the wider improvement programme for Dr Gray's Hospital.
- Request a further update through the appropriate Board governance route on the outcome of the paediatric surgery assessment and any resulting recommendation on service reinstatement.

3 Appendix / List of appendices

None