

Meeting:	NHS Grampian Board
Meeting date:	8 October 2026
Item Number:	9.6
Title:	Moray Maternity Programme (Model 6) Update
Responsible Executive:	Geraldine Fraser, Chief Officer – Acute Services
Report Author:	Jane Gill, Programme Director

1 Purpose and recommendations

This is presented to the Board for:

- Assurance
- Endorsement

Recommendation(s)

The Board is asked to:

- **Acknowledge** – significant progress delivered since approval of the Moray Maternity Services plans in 2023, with substantial elements of Model 6 already in place, further significant additions secured for delivery by the end of 2026, and phased delivery of the remaining elements continuing through 2027 as the necessary clinical, safety, workforce and operational conditions continue to be worked towards.
- **Acknowledge** – that delivery of the remaining elements of Model 6 requires interrelated workforce, theatre, operational, governance and wider system arrangements across Dr Gray's Hospital, Aberdeen Maternity Hospital and supporting services, and that the steps towards full implementation will continue beyond December 2026.
- **Acknowledge** – that workforce readiness extends beyond recruitment and includes onboarding, induction, competency development, supervision, sustainable rota arrangements and maintenance of specialist skills, with agreed cross-site support required where necessary to enable those arrangements.
- **Endorse** – the dependency-led approach to delivery of the remaining elements of Model 6, supported by the Model 6 delivery roadmap, with responsibility for the remaining actions clearly assigned and continued progression of the workforce, agreed cross-site training and resilience arrangements, sustainable 24/7 theatre provision at Dr Gray's Hospital, and the other operational requirements for safe and sustainable implementation.

- **Endorse** – continued executive oversight and engagement with Scottish Government, staff, public partners and local stakeholders to support the necessary steps which would enable the delivery of the Model 6 roadmap and secure the cross-organisational action required to address the remaining workforce, theatre and wider system requirements.

2.0 Report summary

2.1 Situation

This paper provides NHS Grampian Board with an update on the Moray Maternity Programme, the current risk and dependency position, progress achieved to date, and the actions underway to support the safe and sustainable delivery of Model 6, which is the expanded consultant-led maternity service for Moray.

NHS Grampian remains committed to achieving the full delivery of Model 6, restoring and extending the range of specialist maternity care which is available locally. Significant progress has already been made, with a range of Model 6 service components now operating in Moray and work continuing to deliver the remaining elements of the model as soon as possible.

The original expectation of full delivery of Model 6 by the end of 2026 has been reviewed. The remaining elements are increasingly concentrated in the more complex workforce, theatre, operational and wider system requirements that need co-ordinated action across NHS Grampian. The Model 6 delivery roadmap now sets out those remaining requirements and inter-dependencies, and distinguishes clearly between what has been delivered, what is secured, what is expected on the current trajectory, and what remains dependent on specific enabling conditions.

2.2 Background

The Moray Maternity Programme was established following the Scottish Government-commissioned review of maternity services for women and families in Moray. Previous NHS Grampian Board reporting described the review as being commissioned to identify a future obstetric model that would provide safe, deliverable, sustainable and high-quality maternity services for women and families in Moray, in line with national maternity and neonatal care ambitions and standards.

The review considered a range of models for maternity care in Moray and recommended a staged approach. Previous NHS Grampian Board reporting described the initial stage as implementation of a Community Maternity Unit model, with elective Caesarean sections at Dr Gray's Hospital, followed by phased progression towards Model 6, the agreed consultant-led maternity model, subject to the required workforce and wider hospital arrangements being delivered.

Since approval of the Moray Maternity Services plans in 2023, dedicated Scottish Government funding has supported significant restoration and expansion of maternity services in Moray. Progress includes the return of planned Caesarean births at Dr Gray's Hospital, expansion of local antenatal, ultrasound and day assessment services, implementation of the maternity telephone triage service, approval of Special Care Unit go-live readiness, workforce growth across maternity and

supporting services (over 70 posts), and ongoing community engagement as detailed later in the paper.

2.3 Assessment

As the programme moves into autumn 2026, significant progress has been made and the remaining requirements that will enable full implementation are now more clearly defined. These include workforce readiness, sustainable 24/7 theatre provision at Dr Gray's Hospital, cross-site training and skills-maintenance arrangements, transfer and escalation pathways, and wider service resilience.

The maternity telephone triage service went live on 1 September 2026, providing a single maternity triage service across Grampian. The 4-cot Special Care Unit at Dr Gray's Hospital has completed programme governance and readiness approval and is progressing towards operational go-live which is expected by December.

With these developments delivered or nearing go-live, the next phase is focused on the remaining requirements that will enable the delivery of the full Model 6. These include targeted recruitment and marketing for hard-to-fill consultant obstetric and gynaecology and anaesthetic posts; sustainable cross-site training, supervision and skills maintenance; strengthened clinical escalation and transfer pathways; clinically governed eligibility criteria and service parameters for care at Dr Gray's Hospital; and sustainable 24/7 theatre provision. The delivery roadmap sets out the actions, ownership and governance routes required across NHS Grampian, recognising that some elements - particularly the future theatre model and workforce configuration - require whole-hospital action rather than maternity action alone.

A Model 6 delivery roadmap has been developed. This provides a clear route for phased implementation, with defined ownership and governance for the actions required to support full delivery of Model 6.

We will introduce each remaining part of Model 6 as soon as it is safe and ready, while NHS Grampian progresses the remaining dependencies required for full implementation. A phased implementation approach will allow individual elements to be introduced as soon as the necessary workforce, delivery and governance conditions are in place, rather than waiting for a single programme-wide implementation date.

The delivery roadmap provides the clearest current indication of when further elements can be expected, while explicitly identifying where timing remains dependent on workforce, theatre or wider system requirements. As those requirements are resolved, services will be introduced at the earliest safe opportunity. This approach has already been demonstrated through the return of planned Caesarean births, which were reintroduced several months earlier than originally anticipated once the necessary arrangements were in place.

2.3.1 Quality / Patient Care

Each service development will be tested for clinical and operational readiness and, once that readiness is demonstrated, will proceed to go-live. Where required, cross-site arrangements with Aberdeen will support training, supervision and maintenance of specialist skills.

In addition, to the telephone triage service and Special Care Unit, immediate priorities include implementation of the Pregnancy Acute Care Escalation Pathway (PACE), progression of the remifentanyl workstream, targeted recruitment and marketing for hard-to-fill obstetric, gynaecology and anaesthetic posts, and strengthened cross-site clinical arrangements to support workforce sustainability and service resilience.

The Model 6 delivery roadmap assigns clear ownership and governance routes to the remaining actions across clinical, operational and leadership teams, ensuring that dependencies requiring wider NHS Grampian support are actively progressed.

Further work includes applying the agreed Dr Gray's risk profile, escalation criteria and transfer pathways, strengthening out-of-hours theatre cover, and publishing the eligibility and risk criteria for care at Dr Gray's Hospital, with updates following each phase of service implementation so women and families in Moray have clear information about the care available locally.

2.3.2 Workforce

Workforce is the principal remaining constraint to full Model 6 delivery. Recruitment has been successful across a number of specialties, but further work is required to build sustainable obstetric, gynaecology and anaesthetic teams. Locum arrangements are supporting immediate service resilience while substantive recruitment, retention and development of existing and returning clinicians continue. A targeted recruitment and marketing campaign will support the remaining hard-to-fill consultant posts, building on approaches that have already attracted stronger interest and higher-quality applications in other specialties. The clearer delivery roadmap will also support recruitment and retention by giving prospective and existing staff greater visibility of how the service will develop.

Full Model 6 delivery also requires sustainable 24/7 theatre provision at Dr Gray's Hospital and an agreed consultant anaesthetic workforce model. These are whole-hospital requirements which will be finalised and approved so that the necessary rota arrangements, establishment and recruitment can progress without delay. The delivery roadmap sets out how these requirements will be progressed and who is responsible for taking them through to implementation.

Where residual gaps remain, appropriate temporary cross-site working, shared-resource and contingency arrangements will be required to bridge those gaps and support safe and sustainable delivery.

2.3.3 Financial

Scottish Government provided funding totalling £5.3m in 2025/26 to fund NHS Grampian costs associated with implementation of the Moray Maternity Model 6.

The current forecast expenditure for 2026/27 is £6m; however, this is subject to reforecast in light of recruitment assumptions, workforce phasing and revised delivery timelines.

The recurrent budget requirement, after removal of temporary project costs, is currently estimated at £7.7m. Discussions continue with Scottish Government regarding the allocation of recurring funding to support the delivery of Model 6.

2.3.4 Risk Assessment / Management

The principal delivery risks are now concentrated in the remaining workforce, theatre and wider system requirements. Phased implementation reduces risk by allowing each element to proceed as soon as clinical, safety and operational readiness is demonstrated, rather than introducing services before the necessary workforce and supporting arrangements are in place.

2.3.5 Equality and Diversity, including Health Inequalities

The programme is already improving access to maternity care closer to home for women and families in Moray, with further expansion planned as the required workforce and supporting arrangements are put in place.

Regular updates to Scottish Government have highlighted the completed return of planned Caesarean births, local specialist antenatal services, local ultrasound and Day Assessment Unit appointments, and community engagement across Moray. Taken together, expanded local maternity services have already saved Moray families considerable travel time.

The indicative phased delivery position does not alter NHS Grampian's commitment to full delivery of Model 6. Rather, it is intended to ensure that further service expansion is delivered sustainably, with the required workforce, governance and clinical assurance in place.

2.3.6 Other impacts

There are significant public and Scottish Government expectations regarding progress, future timescales, phased expansion of eligibility for care and birth at Dr Gray's Hospital, and the remaining delivery dependencies. The communications and engagement plan will support clear and co-ordinated communication as implementation progresses.

Model 6 will continue to be considered within the wider national maternity policy context. The Scottish Government has confirmed that Elgin will be specifically included within the National Maternity Review, providing a further opportunity for the particular requirements of maternity care in Moray to inform national policy and planning.

2.3.7 Communication, involvement, engagement and consultation

Engagement with local families has continued through regular Keep Mum and Maternity Voices Partnership meetings and more than 30 outreach events, involving hundreds of conversations across Moray.

The Communications and Engagement workstream continues to support recruitment and stakeholder engagement. The most recent phase of the campaign reached approximately 1.5 million clinically relevant individuals, generated more than 29,000 website visits and 348 expressions of interest, bringing the total number of expressions of interest generated across the campaign to more than 1,600.

The campaign has supported the recruitment of more than 70 additional staff across maternity and supporting services. Its targeted, data-led approach is now being considered for wider use within NHS Grampian and has attracted interest from other NHS boards, NHS Scotland and the Scottish Government.

Engagement continues with Scottish Government, elected representatives, staff, Keep Mum and the Maternity Voices Partnership. A coordinated communications and engagement plan has been developed to support the next phase, providing clear and consistent information on progress, phased service expansion, eligibility, the Model 6 delivery roadmap and the remaining workforce, theatre and operational requirements for full delivery.

2.3.8 Route to the Meeting

The current position reflects continued review of programme progress, delivery risks and implementation dependencies, together with the outputs of a multidisciplinary workshop held in September with executive support. The workshop validated key assumptions, confirmed the principal dependencies and clarified ownership and accountability for the remaining actions. These outputs have informed the Model 6 delivery roadmap and reinforced that delivery of the remaining elements requires coordinated organisational action beyond the maternity programme. This report provides the Board with the updated position and seeks assurance and endorsement of that approach.

Route: Moray Maternity Programme Board Chair -> Responsible Executive -> NHS Grampian Board

2.4 Recommendation(s)

The Board is asked to:

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- **Endorse** – the dependency-led approach to delivery of the remaining elements of Model 6, supported by the Model 6 delivery roadmap, with responsibility for the remaining actions clearly assigned and continued progression of the workforce, agreed cross-site training and resilience arrangements, sustainable 24/7 theatre provision at Dr Gray's Hospital, and the other operational requirements for safe and sustainable implementation.

- **Endorse** – continued executive oversight and engagement with Scottish Government, staff, public partners and local stakeholders to support the necessary steps which would enable the delivery of the Model 6 roadmap and secure the cross-organisational action required to address the remaining workforce, theatre and wider system requirements.

3 Appendix/List of appendices

The following appendix/appendices are included with this report:

- Appendix 1 – Dependency Road Map