



Integration Joint Board
Finance, Performance and Quality Committee

8th July 2025

This Report relates to
Item 5b on the Agenda

Maternity Direction Update

Paper presented by Angie Marshall

For Discussion / Noting

Author:	Angie Marshall, Director of Midwifery angie.marshall@nhs.scot Justine Parkinson, Assistant General Manager justine.parkinson@dg.nhs.scot Kirsty Bell, Health and Social Care Programme Manager Kirsty.bell3@nhs.scot
Approved for Submission by:	Nicole Hamlet, Interim Chief Officer Nicole.Hamlet2@nhs.scot
List of Background Papers:	N/A
Appendices:	Appendix 1 – Direction to NHS Board

1. Introduction

- 1.1 On 24th September 2024, the Dumfries and Galloway Integration Joint Board (IJB) made the decision not to reintroduce a birthing service within the Galloway Community Hospital (GCH) in Stranraer, choosing instead to maintain the current model of care (Option 1), which provides antenatal and postnatal services via the Community Maternity Hub and limited support for home births, but no provision for planned intrapartum care locally.
- 1.2 A Direction was then sent to NHS Dumfries and Galloway to maintain (Option 1) the current model of care (Appendix 1).
- 1.3 This paper is following the agreement to review the Direction and to provide assurance of the safe delivery of the Maternity Direction which will subsequently be tabled for assurance to the Integration Joint Board in September 2025.

2. Recommendations

- 2.1 **The IJB Finance, Performance and Quality Committee is asked to:**
- **Take assurance of the safe delivery of the Maternity Direction from the detail within the main report following the decision made by the Integration Joint Board in September 2024.**

3. Background and Main Report

- 3.1 A comprehensive consultation process was undertaken, adhering to both statutory and local engagement requirements. The consultation period was extended by an additional two weeks to accommodate the Christmas holiday period, ensuring ample opportunity for participation.
- 3.2 Following advice from the consultation group, it was determined that presenting only two options would not yield sufficient insight into stakeholder preferences. As a result, the approach was adjusted to better capture the reasoning behind participants' views.
- 3.3 Despite the extensive efforts made, including a thorough engagement strategy, overall participation from service users and the general public was limited. This is acknowledged in the final report tabled at the IJB on the 24th September 2024.
- 3.4 Nevertheless, the Scottish Government has recognised the approach taken in the review of Maternity Services in the western region as exceptionally comprehensive.

Comparative Context and Rationale for Option 1

- 3.5 In reviewing maternity service models, it is instructive to consider the experience of another Board, where services were suspended in 2022 due to workforce constraints. A temporary secondment of a midwife allowed for the reintroduction of a low-risk, on-call Community Midwifery Unit (CMU) model.
- 3.6 However, persistent rota gaps, limited patient suitability (only 8 of 64 women), and hospital transfer times of up to 3.5 hours have raised serious concerns about the long-term sustainability of this model.

3.7 In contrast, Dumfries and Galloway (D&G) faces significantly higher caseloads, with approximately 40 women per midwife. The on-call model remains well supported by community midwives across the region.

3.8 While concerns have been raised about the risk of roadside births along the A75, actual rates of babies born before arrival (BBAs) are consistent with national averages across both rural and urban areas.

3.9 **Maternity Activity Data (September 2024 – June 2025)**

Since the closure of the CMU at Galloway Community Hospital in September 2024, a total of 692 babies have been born across D&G:

- West (Wigtown and Stewartry): 191 births
- East (Nithsdale, Annandale and Eskdale): 501 births

3.10 **Birth Before Arrival (BBA) Rates:**

- West: 0.5%
- East: 1%

This data indicates that the likelihood of a BBA in the East (central Dumfries) is double that of the West, despite concerns about rural travel distances.

3.11 **Homebirths:**

- Regional homebirth rate: 0.6%
- Wigtownshire homebirth requests: 0

4. Conclusions

4.1 The Integration Joint Board's (IJB) decision to adopt Option 1 reflects a comprehensive analysis of workforce capacity, patient safety, service equity, and long-term sustainability, where this continues to be monitored and reviewed at an operational level, with clear escalation routes in place and the detail within this report is to provide this assurance to the Committee.

4.2 Option 1 remains the most viable and safe model for delivering maternity care in Wigtownshire, both now and into the foreseeable future.

5. Resource Implications

5.1 There is no direct resource implications associated with this report. However, ongoing challenges in rota management and workforce sustainability were key drivers behind the decision-making process, and these challenges persist.

5.2 The decision reflects a continued commitment to ensuring safe, effective, and sustainable maternity care services.

6. Impact on Integration Joint Board Outcomes, Priorities and Policy

6.1 National Health and Wellbeing Outcomes:

- People who use health and social care services have positive experiences of those services, and have their dignity respected.
- Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.

- Health and social care services contribute to reducing health inequalities
- People who use health and social care services are safe from harm
- People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.
- Resources are used effectively and efficiently in the provision of health and social care services.

- 6.2 Supports delivery of the following Strategic Commissioning Intention (SCI):
- SCI4 - People have access to the care and support they need
 - SCI5 - People's care and support is safe, effective and sustainable

7. Legal and Risk Implications

- 7.1 All expectant mothers undergo a comprehensive risk assessment using the nationally standardised tool.
- 7.2 This ensures that each woman receives care tailored to her clinical needs. Our data shows that only 23% of women met the criteria for birth in a Community Midwifery Unit (CMU), underscoring the importance of appropriate triage.
- 7.3 This approach is fundamentally about safeguarding the health and wellbeing of both mothers and their babies.

8. Consultation

- 8.1 Consultation with staff across the Health and Social Care Partnership along with provider partners and people accessing care.

9. Equality Impact Assessment

- 9.1 A refresh of the initial Equality and Human Rights Impact Assessment (EQIA) will be undertaken to ensure continued compliance and inclusivity where this will be reviewed in time for the scheduled IJB in September 2025.
- 9.2 NHS Dumfries and Galloway acknowledges the findings of the Scottish Human Rights Commission report, which highlights the challenges faced by individuals in remote and rural areas in accessing essential maternity care.
- 9.3 We have worked to enhance the range of maternity services available within Wigtownshire. This includes strengthening antenatal and postnatal care provision, and ensuring that women and families receive consistent, high-quality care throughout their maternity journey.
- 9.4 We actively collaborate with the Scottish Perinatal Network to ensure a "Once for Scotland" approach to maternity care, which prioritises safety, equity, and sustainability. Decisions regarding service models are made with careful consideration of clinical safety, workforce availability, and the needs of the local population.

10. Glossary

EQIA	Equalities Impact Assessment
IJB	Integration Joint Board

Dumfries and Galloway Integration Joint Board

DIRECTION

(ISSUED UNDER SECTIONS 26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014)

1.	Title of Direction and Reference Number	IJBD2402 Delivery of Option 1 which represents the birthing service currently available in Wigtownshire. It would comprise continued care provision from Community Maternity Hub (Oak Tree Family Centre) and support for home births, but with no provision for intrapartum care within Galloway Community Hospital.
2.	Date Direction Issued by Integration Joint Board	20 November 2024
3.	Date from which Direction takes effect	24 September 2024
4.	Direction to	NHS Dumfries and Galloway
5.	Does this Direction supersede, amend or cancel a previous Direction? If yes, include the reference number(s)	Yes – IJBD2304
6.	Functions covered by Direction	Maternity Services in Wigtownshire – community and inpatient services
7.	Full text of Direction	Delivery of Option 1 which represents the birthing service currently available in Wigtownshire. It would comprise continued care provision from Community Maternity Hub (Oak Tree Family Centre) and support for home births, but with no provision for intrapartum care within Galloway Community Hospital.
8.	Budget allocated by Integration Joint Board to carry out Direction	This will be delivered as part of the current budget allocated to delivery of Maternity Services in the West of the region together with the workforce resources.
9.	Desired Outcomes	People who use Health and Social Care Services have positive experiences. This will allow for continued management of overall occupancy with an increasing demand on

		presentations and admissions across acute care. The use of these rooms has resulted in a reduced number of transfers to DGRI for non-clinical reasons.	
10.	Is there a need for engagement with the third sector in delivery of this Direction?	YES	NO
			X
		If there is a possibility that the service is to be delivered via third sector organisations there should be consultation with the third sector on the design of the service.	
11.	Performance Monitoring Arrangements	Directions will be reported to the relevant IJB Committee on a 6 monthly basis. An annual report of all current Directions will be presented to the IJB	
12.	Date Direction will be Reviewed	October 2025	