Development in the Maternity Services in Scotland 2012 - 2015
4 Campus delivery
• Framework for Maternity Services 2001
  Midwife as lead practitioner for low risk women pregnancies

• Keeping Childbirth Natural & Dynamic
  - Funded – Consultant Midwives
  - Multipractical training

• National Pathways for Midwifery Care
  Green ➔ Amber ➔ Red
Next phase of Scottish Government Initiatives (Clinical practice):

- Refreshed Framework for Maternity Services in Scotland (RFMCS)
- *Getting it right for every child (GIRFEC)*
- Early Years Framework
- Reducing inequalities
- Refreshed Infant and Maternal Nutrition
• 1. High quality, evidence-based antenatal care that identifies risks early and takes effective action to deal with them—capitalising on the evidence that the antenatal period is an optimum point at which most women are highly motivated to do what is best for their baby,
• 2. Continuity of care and carers
• 3. Schemes to improve maternal nutrition during pregnancy,
• 4. Measures to alleviate poverty in families, including income maximisation and employability services.
• Recognises the antenatal period as being the vital opportunity to influence health, behaviours for the child and family.
• Recognises the essential role midwives have during this period.
• Recognise the need to prepare midwives with appropriate knowledge and skills to effectively adopt a holistic approach to care (Maternal, child and family health).
RFMCS

- Prevention of problems
- Early intervention
- An increasing emphasis on partnerships and outcomes to realise a transformational change in public sector service delivery
- Building capacity in communities, families, parents and children to help them tackle their problems
• Getting it right for every child – the principles within this initiative is the platform for all other initiatives.
• This key principle is that the child is the centre of all maternity care.
• Every health professional needs to ask themselves:
  What can I do and what can I do better?
Focus

My World Triangle

What I Need from People Who Look After Me

- Guidance, supporting me to make the right choices
- Knowing what is going to happen & when
- Understanding my family’s history, background & beliefs
- Everyday care & help
- Keeping me safe
- Being there for me
- Play, encouragement & fun

How I Grow & Develop

- Being healthy
- Learning to be responsible
- Becoming independent, looking after myself
- Enjoying family & friends

My World

My Wider World

Support from family, friends & other people
Local resources
Comfortable & safe housing
Belonging
School
Enough money
Work opportunities for my family

The whole child or young person: Physical, Social, Educational, Emotional, Spiritual & Psychological development
Partnership Working

Resilience
Characteristics that enhance normal development under difficult conditions

Adversity
Life events or circumstances posing a threat to healthy development

Protective environment
Factors in the child’s environment acting as buffers to the negative effects of adverse experience

Vulnerability
Characteristics of the child, the family circle and wider community which might threaten or challenge healthy development
• What does this mean for midwifery?
• Leaders in midwifery are required – CNO has funded national workshops.
• Approach to midwifery care needs to be asset based:
  - What skills do I already have?
  - How can I use them the most effectively?
  - When can I use them appropriately?
  - What skills / training do I need?
• This strengths/asset based approaches is used to promote health and behaviour change
• Effective leadership, communication, translation and interpretation services are in place
• Inequalities sensitive practice is promoted
• Reductions in healthcare acquired infections during pregnancy and childbirth
• Reductions in inequalities in access to antenatal and postnatal care services
• Reductions in inequalities of care quality experience
• Chief Nurse for Scotland Educational Review – streamline education
• Clinical Academic Career Framework
• Early Clinical Academic Careers
• Extended roles for midwives
• Multiprofessional national training
• National resources – training and education
What does this mean for Midwifery education? Major changes!!!

• Partnership approach - education & training
• Flexible and responsive
• Midwifery and maternity care programmes
• Joint appointments
• Clinical based courses
• Research related activities
Challenges

• Resistance to change (workforce)
• Workforce – midwives (accountability)
• Workforce – assistant and support workers (no accountability)
• Student midwife intake – future crisis
• Funds - NHS Boards to support initiatives
• Low staff moral
• Career prospects for current staff
Principles of initiatives are sound

What now needs to be done for midwifery:

- Robust change management mechanisms and implementation
- Ensure excellent leadership at every level
- Respect and protect the current workforce
- Ensure standards of care are not compromised
- Protect the profession
“together we are stronger