

State of Maternity Services Report 2018 – Scotland



Promoting • Supporting • Influencing

#soms2018

Executive summary

The RCM's annual *State of Maternity Services Report* provides an overview of some of the 'big picture' trends that are taking place in the midwifery workforce and identifies some of the challenges that face the profession and our maternity services. This year, for the first time, the RCM is publishing individual reports for Scotland, England, Wales and Northern Ireland, rather than one report for the UK as a whole. This is our report for Scotland.

Looking at the UK as a whole, Scotland is faring better than England, which has a shortage of the equivalent of 3,500 full-time midwives and which is likely to be particularly challenged by the loss of significant numbers of EU midwives in light of Brexit.

"There are a rising number of unfilled midwifery vacancies, with particular problems in the north of Scotland."

Challenges

Although less acute than the English situation, the report which follows highlights a number of challenges for the midwifery workforce in Scotland. There are a rising number of unfilled midwifery vacancies, with particular problems in the north of Scotland.

In March 2018 there were 127 whole time equivalent (WTE) midwifery vacancies in Scotland, of these 45.5 have remained unfilled for more than three months. This is an overall vacancy rate of five per cent, a significant rise from the 1.3 per cent vacancy rate five years ago. The statistics for midwifery vacancies show a marked increase in the number of vacancies over the last five years:

	Total vacancies	Vacant for more than 3 months	Overall vacancy %
September 2013	32.1	6	1.3
September 2014	61.2	12.2	2.5
December 2015	68.3	17.5	2.7
September 2016	105.2	40.7	4.3
September 2017	112.1	36.7	4.5
March 2018	127	45.5	5

The number of midwifery vacancies in the system has quadrupled over the last five years. The number of vacancies that have been unfilled for more than three months has multiplied more than sevenfold from six in 2013 to 45.5 in 2018.

Three Boards in Scotland have midwifery vacancy rates that concern us: NHS Highland, NHS Western Isles and NHS Grampian. We welcome the introduction of a new shortened programme of midwifery education commencing in January 2019, which will enable registered nurses to retrain as midwives over two years in Inverness. This is likely to go some way to address the particularly acute problems in the north.

The RCM also acknowledges the proactive work being undertaken by Robert Gordon University and some of the northern and island Boards to promote midwifery as a profession to local school leavers. However, the midwifery and wider health workforce in the north of Scotland and on the islands is fragile and focussed work on recruitment and retention of midwives and other linked professions in these areas should be a priority for the Scottish Government.

We continue to have a significant proportion of the midwifery workforce that is aged over 55 and who could therefore choose to retire at any time.

The retirement rate has accelerated rapidly over the last two years. In July 2017 the RCM submitted a Freedom of Information request to NHS Greater Glasgow and Clyde (GGC) Health Board. This included a request for information about the number of midwives leaving GGC over the preceding five years, including retirements.

Leavers	2012-13	2013-14	2014-15	2015-16	2016-17
Total	23	23	27	40	43
Retirements	10	15	17	21	30

There was a tripling in the number of midwives retiring in the four years to 2016/17. GGC had a total of 609 full-time equivalent midwives in March 2017. Thirty midwives retiring is therefore 4.9 per cent of their total midwifery workforce, 43 is seven per cent of their midwives leaving in the last year.

Falling births v Increased complexity

There is also evidence that while the number of births is falling somewhat, the workload for midwives is not reducing proportionately. The workload has been increased through the significant rise in the number of inductions of labour and the rise in the number of older women and women with a very raised BMI becoming pregnant and giving birth.

There were 52,861 live births in Scotland last year, down three per cent on the preceding 12 months. The total is down from a peak of just over 60,000 in 2008. When birth numbers are rising, especially if sustained over a number of years, it can place great pressure on midwives and the service as a whole.

"The majority (54 per cent) of Scottish babies born in 2017 were to women in their thirties and forties."

The falling birth rate in Scotland does not appear to have led to a fall in the workload for midwives. This is likely to be due to two key factors: the changing demographic of the women that are becoming pregnant and having babies and recent changes in some clinical practice in Scotland that has led to a significant rise in the number of women having their labour medically induced. Between 2000 and 2017, for example, the number of babies born to women in their late thirties (35-39) rose by a third (32 per cent); by two-thirds (68 per cent) for women in their early forties (40-44); and fivefold for women aged 45 or older (although there are only small numbers for this age group, from 29 to 158).

The majority (54 per cent) of Scottish babies born in 2017 were to women in their thirties and forties. Older women on average need more care and support during pregnancy and birth. This is because older women are more likely to have developed medical conditions that require higher levels of monitoring and care. They are also more likely to have multiple pregnancies and develop other pregnancy complications. Though this is not true for all older women, overall the changing profile of pregnant women is leading to an increased workload for midwives. Last year may well have been the first year when most women accessing maternity care were assessed as overweight or obese

at the time of their booking appointment. Overweight and obese women are more likely to have conditions that require higher levels of care, such as high blood pressure and gestational diabetes. They also require careful monitoring for complications for their babies such as an increased risk of preterm birth and issues with growth of the baby.

A number of initiatives and research studies have been introduced across Scotland over recent years that have led to a significant increase in the number of medical inductions of labour in many areas: one large health board saw an increase in their overall induction rate from 26 per cent in 2015 to 34 per cent in 2017. Such increases in intervention lead to an increase in the number of women being admitted to hospital, the length of their stay and an increase in the midwifery care they require.

Green shoots

There are a number of more positive developments highlighted in the report findings. We will begin to see the benefits of a government that has responded to the concerns and lobbying of the RCM and others about the need to increase the number of student midwife places. The number of student midwife places commissioned by the Scottish Government was very significantly increased in 2017 and 2018. The number of places was increased by 18 per cent in 2017 and a further increase of 13 per cent means that we will have 230 new student midwives starting in 2018, compared to 178 in 2016.

"There are a number of more positive developments highlighted in the report findings."

The Scottish Government has also continued the provision of bursaries for student midwives, with no fees for undergraduate programmes for all Scottish students. This has been helpful in continuing to maintain a high level of interest in midwifery training places.

However, this rise in student numbers needs to be matched by a proportionate rise in the number of midwifery lecturers and in well-prepared midwife mentors who supervise and support students when they are in practice placements. The rapid increase in student numbers, while welcome, can also bring some additional pressure into the maternity service in order to effectively support students' practice experience.

The age profile of midwives in Scotland

On the issue of age profile, we have also started to see early signs that progress is being made. Between March 2013 and March 2018, for example, the proportion of midwives working in the NHS in Scotland aged under 35 has edged up helpfully from 20 per cent to 23 per cent.

Nonetheless, challenges persist. Whilst we have seen a rise in the proportion of midwives aged under 35, the proportion aged 50 or older jumped from 34 per cent in March 2013 to 40 per cent in March 2018. In other words, two in every five midwives are now in their fifties or sixties. The NHS is lucky to have these midwives. They will bring to their work many years of experience, but inevitably they are beginning to near retirement and we need to act in good time before that happens.

Sustaining higher midwife student numbers over time is the best way to address the challenge posed by the rise in the proportion of midwives in these older age groups. We will continue to press for this, and welcome the commitment so far to expanding the provision of midwifery training.

Over the last two years we have seen a very marked change in the number of newly-qualified midwives coming into the maternity service in Scotland. Nearly every midwife who qualified in 2017 and 2018 has been offered a post upon qualification. While this is very welcome for those who have spent three years training, it also means that services are needing to support a larger number of less experienced newly-qualified midwives each year. This brings with it some pressure in the system in terms of skill mix and workload for more experienced midwives to offer support to early career midwives.

It follows, of course, that with the proportion of midwives in younger and older age brackets rising, the proportion in the middle age brackets is falling. Indeed, the proportion of midwives in their forties dropped in the five years to March 2018 from over a third (36 per cent) to a quarter (25 per cent). The proportion of midwives aged in their late forties (45-49) essentially halved, from around one in four of all midwives to around one in eight.

We do need to consider what the implications are of these changes to the midwifery workforce. People will tend to have different responsibilities at different stages of their life, from juggling the needs of raising a young family to caring for elderly parents, and eventually having a higher likelihood of developing medical conditions of one's own.

Opportunities and uncertainties of a new model of maternity care

The *Best Start Review of Neonatal and Maternity Services in Scotland*, published in early 2017, heralded a significant change in the way that maternity services will be configured in the future. The RCM has welcomed the review's recommendations for a model of maternity care that is built around continuity of midwifery carer. This model of care has strong evidence of benefits for women, families and, potentially, for midwives. However, the introduction of such a significantly different way of working also brings with it uncertainties for the future workforce. Some older midwives may choose to retire rather than take on a new way of working and it is also not yet clear whether the new model of care will require more midwives. The impact of the implementation of the Best Start review recommendations on the workforce will start to be seen over the next one to two years.

"Two in every five midwives are now in their fifties or sixties."

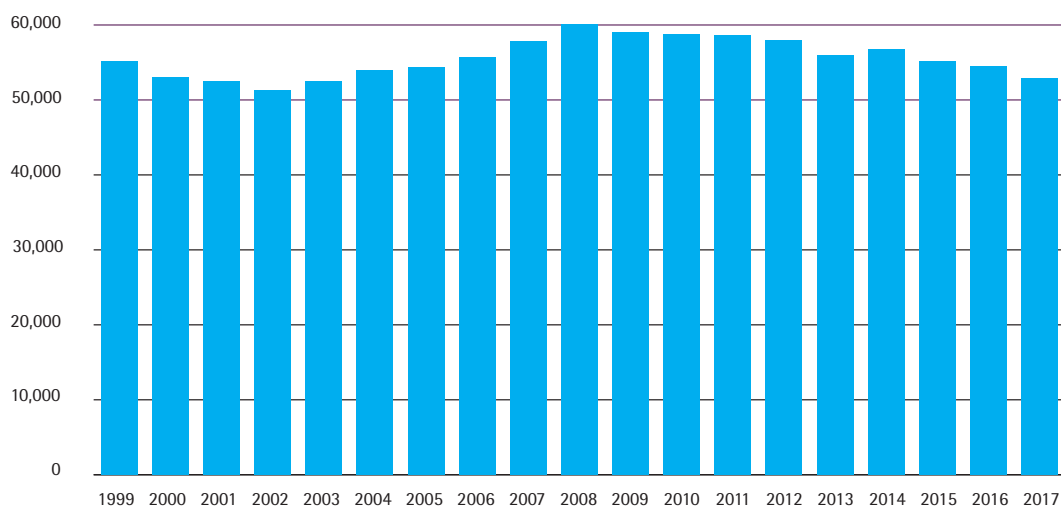
The situation in Scotland is much better than in England, where the service is persistently thousands of midwives short. Here in Scotland we are seeing action to increase student midwife numbers and have already begun to see a rise in the number of younger midwives. But there is no room for complacency. Whilst there are more younger midwives, there are also more older midwives, many of whom are nearing retirement. The demographics of women using maternity care, particularly with regard to their weight and age, is placing more pressure on the NHS. More student midwives means we need more midwifery lecturers and clinical placements. And vacancy rates are rising. These are all challenges.

In many ways, maternity services in Scotland are moving in the right direction, but the pressures on the midwifery workforce and the challenges that we face are real. With this challenging and uncertain picture for maternity services across Scotland, it is vital that midwives have a strong leadership voice at Board and regional level to ensure that high quality maternity services can be assured.

The NHS, the Scottish Government, the RCM and others need to keep working together to identify these challenges and tackle them as best we can. We look forward to reporting back on that next year.



Live births

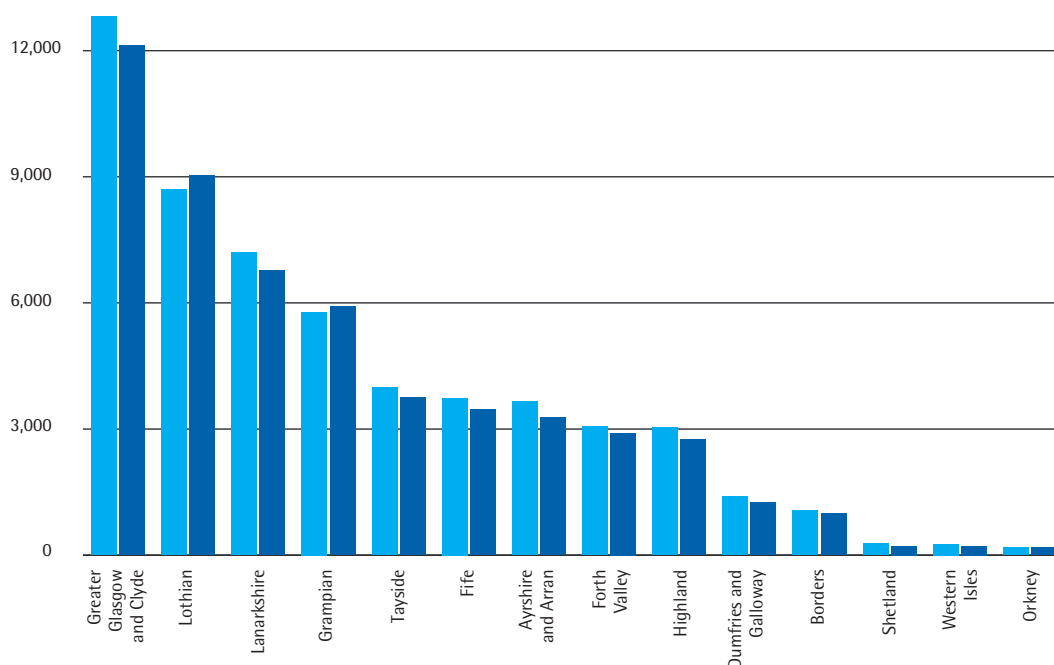


The number of births in Scotland has fluctuated between around 50,000 and 60,000 for many years. This variation is inherent in maternity care, of course, but can present services with very real challenges, and has done so in Scotland in recent years.

Number of live births

Source: National Records of Scotland

Live births by NHS board area



Two areas have seen a rise in births since 1999: NHS Lothian (347 more births between 1999 and 2017) and NHS Grampian (132 more births). All other areas saw a fall in the number of babies born. As with Scotland as a whole, these numbers have fluctuated up and down over the years.

NHS Greater Glasgow and Clyde remains the area with the most births, at 12,126 in 2017, followed by NHS Lothian (9,037), with NHS Orkney, NHS Western Isles and NHS Shetland the three smallest, with 184, 215 and 218 births respectively.

12,126

live births in Greater Glasgow and Clyde in 2017, more than any other health board

Source: National Records of Scotland

Live births 1999

Live births 2017

Source: National Records of Scotland

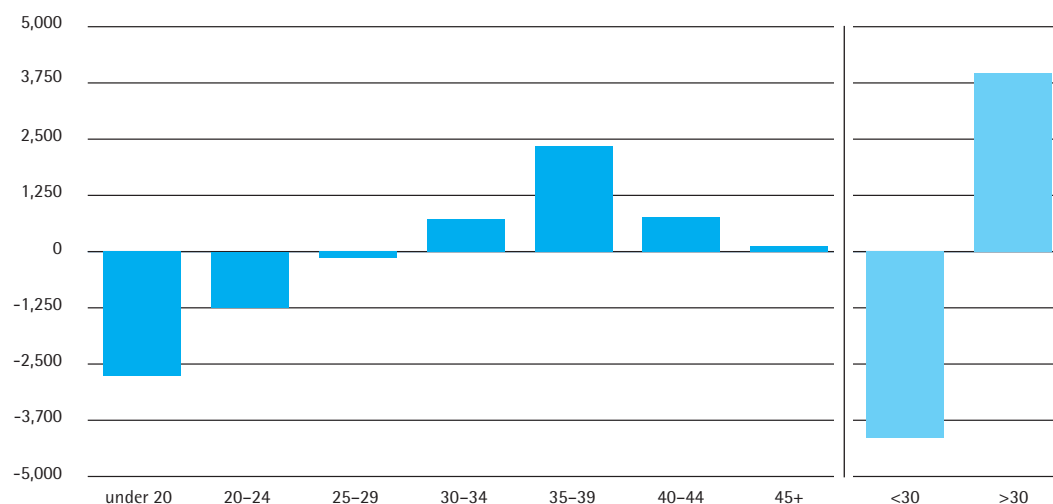


Change in number of live births, 2000-2017

Change in number of live births, 2000-2017

Source: National Records of Scotland

Age profile of mothers



There has been a marked change in the age profile of women using maternity services. The number of babies born to women and girls under the age 20 as well as women in their early and late twenties fell between 2000 and 2017, whilst the number of births to women in their early and late thirties as well as those in their early and late forties rose.

Indeed, whilst the number of births in Scotland fell between 2000 and 2017, births to women aged 30 or over rose by almost 4,000 during that time. In fact, the majority (54 per cent) of Scottish babies born in 2017 were to women in their thirties or forties.

Births to women in their late thirties rose by almost a third (32 per cent) during this period, to 9,745. Births to women in their early forties climbed by two-thirds (68 per cent), to 1,907. Births to women aged 45 or above jumped fivefold, although from a low base, from 29 in 2000 to 158 in 2017.

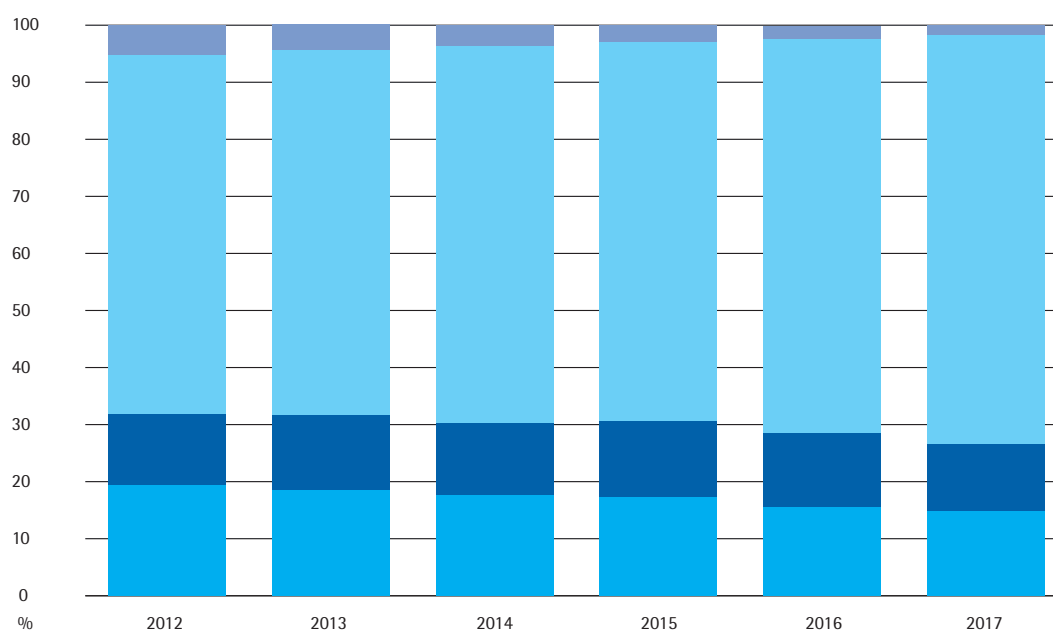
Older women will typically require more care during their pregnancy and postnatally. This will not be true in every case, but overall it does add to the mix of complexity with which maternity services must cope. The very clear ageing of the profile of women accessing maternity care does therefore increase the number of midwives needed by the NHS.

68%

increase in births to women in their early forties

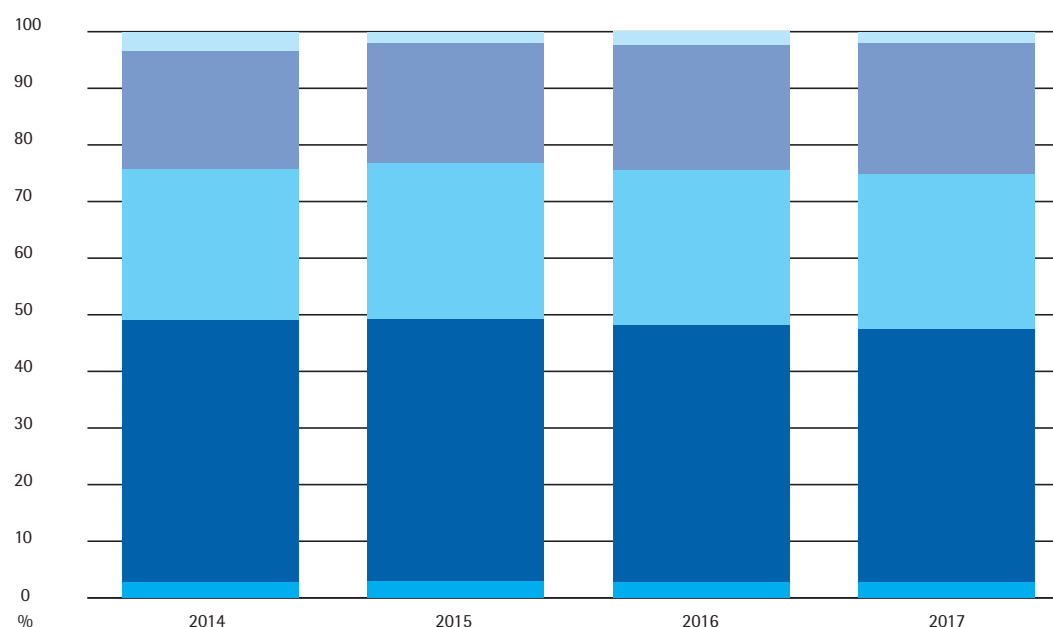
Source: National Records of Scotland

Smoking during pregnancy



Source: ISD Scotland

BMI of pregnant women



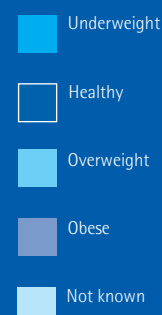
Source: ISD Scotland

Progress has been made in reducing smoking amongst pregnant women, with the proportion who smoke dropped from 19.3 per cent in 2012 to 14.8 per cent in 2017. That stated, the proportion who were former smokers also dropped whilst the proportion who had never been smokers rose markedly, suggesting this improvement stems from fewer people in society taking up smoking in the first place.

With regard to BMI, 2017 was the first year in which over half of women whose weight and height were recorded were obese or overweight. This trend will have an impact on the pressure placed on our maternity services as overweight and especially obese pregnant women will typically require more care than those who have a BMI within the healthy range.

51%
of pregnant women in 2017 were overweight or obese

Source: ISD Scotland





18%

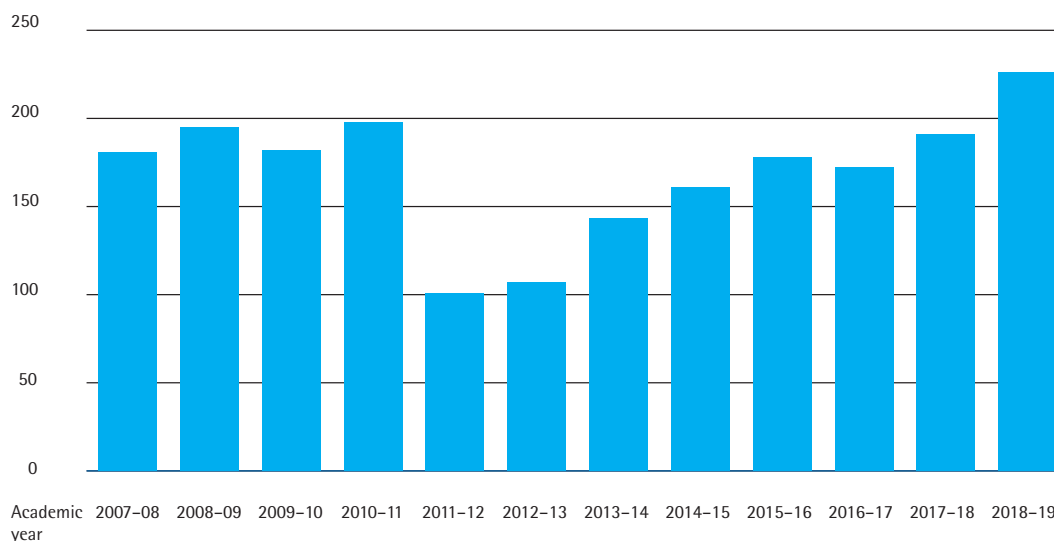
jump in training places available in the 2018-19 academic year

Source: NHS Education for Scotland

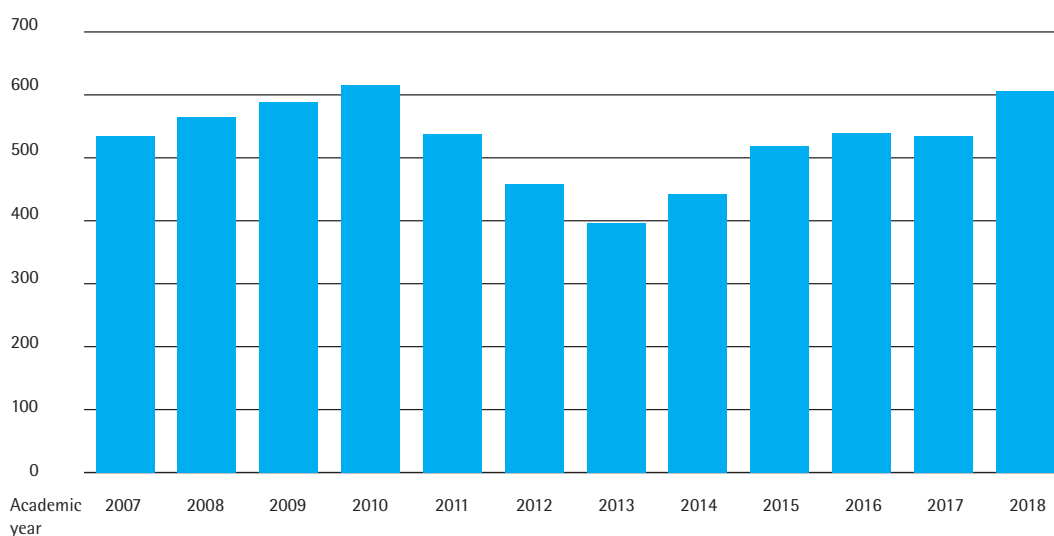
Student midwives at any stage in their training

Source: NHS Education for Scotland

New student midwives



All student midwives



The most important development with regard to student midwives is the commitment by the Scottish Government to increase the number of training places for those who want to qualify as midwives. The RCM has been vocal over a long period in calling for a rise in student midwife places, and we very much welcome that the Scottish Government has responded to these calls.

In the coming academic year – 2018-19 – the number of training places will jump 18.3 per cent from 191 to 226, to boost the number who will be entering the profession in years to come.

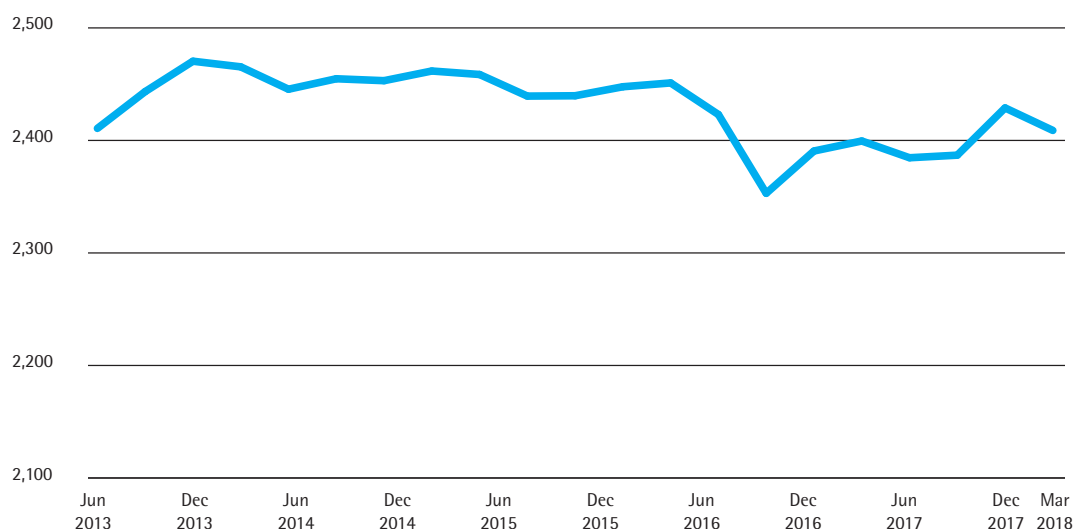
The RCM welcomes the fact that, in Scotland, student midwives pay no tuition fees and continue to receive bursaries to support them during their training.

The RCM also welcomes the introduction of a new shortened programme for registered nurses to become midwives, starting in January 2019, at the University of Highlands and Islands in Inverness. This will ensure that another route into midwifery is opened up that has not been available in Scotland for a number of years.

Additionally, we welcome continued Scottish Government support for return to practice programmes enabling midwives to return to the profession having had time out.

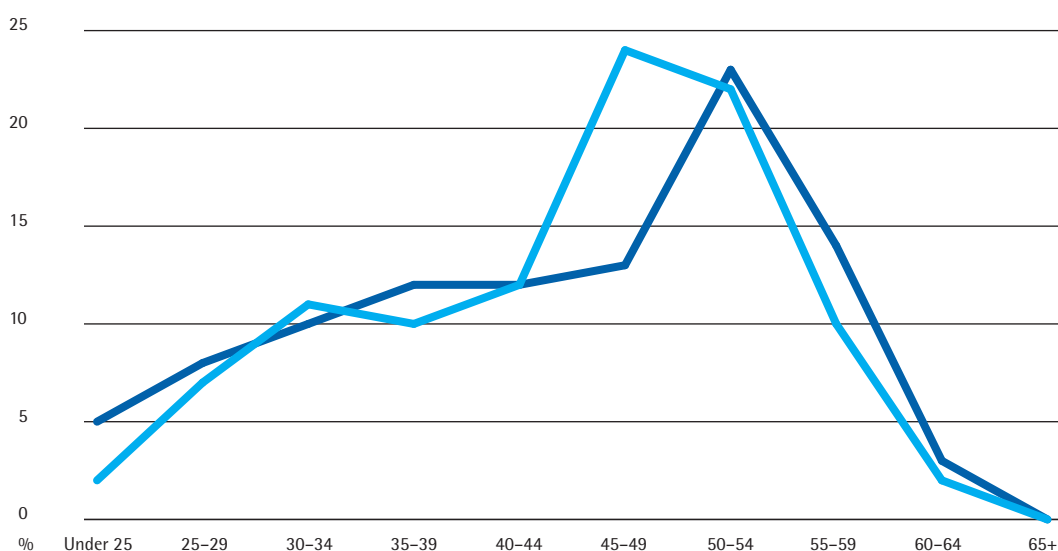


Midwife numbers



The number of midwives in Scotland has been quite stable over time, varying between around 2,350 and 2,470 over the last five years. This echoes the fairly stable number of births in recent years.

Age profile of midwives



The ageing profile of the midwifery profession in Scotland is a concern. In March 2018, for example, two in five midwives (39.8 per cent) were in their fifties or sixties, and the group that saw the largest increase in its size (up 85 midwives between March 2013 and March 2018) was those in their late fifties.

The NHS is fortunate to have such experienced midwives, but inevitably sooner or later they will be entering a richly deserved retirement, and therefore unavailable to staff maternity units in the future.

This changing age profile is the reason the increase in student midwife numbers is so important. There has been a rise in the number of midwives in their twenties in Scotland in recent years, and this needs to continue if we are to see the large number of older midwives replaced before they start to retire.

40%

of midwives in March 2018 were in their fifties and sixties

Source: ISD Scotland

Age profile March 2013

Age profile March 2018

Source: ISD Scotland

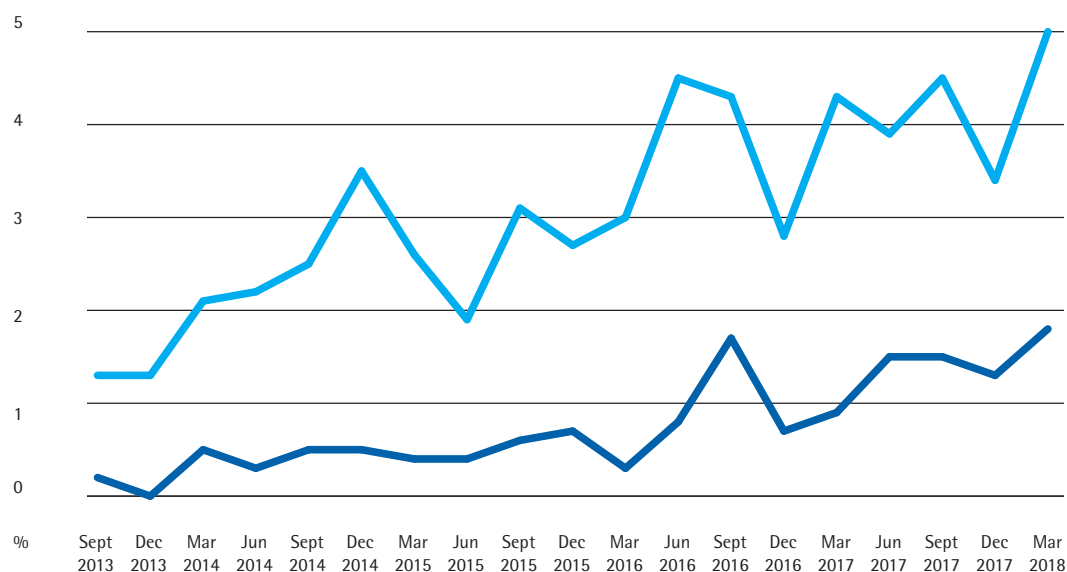


■ % of midwife posts vacant

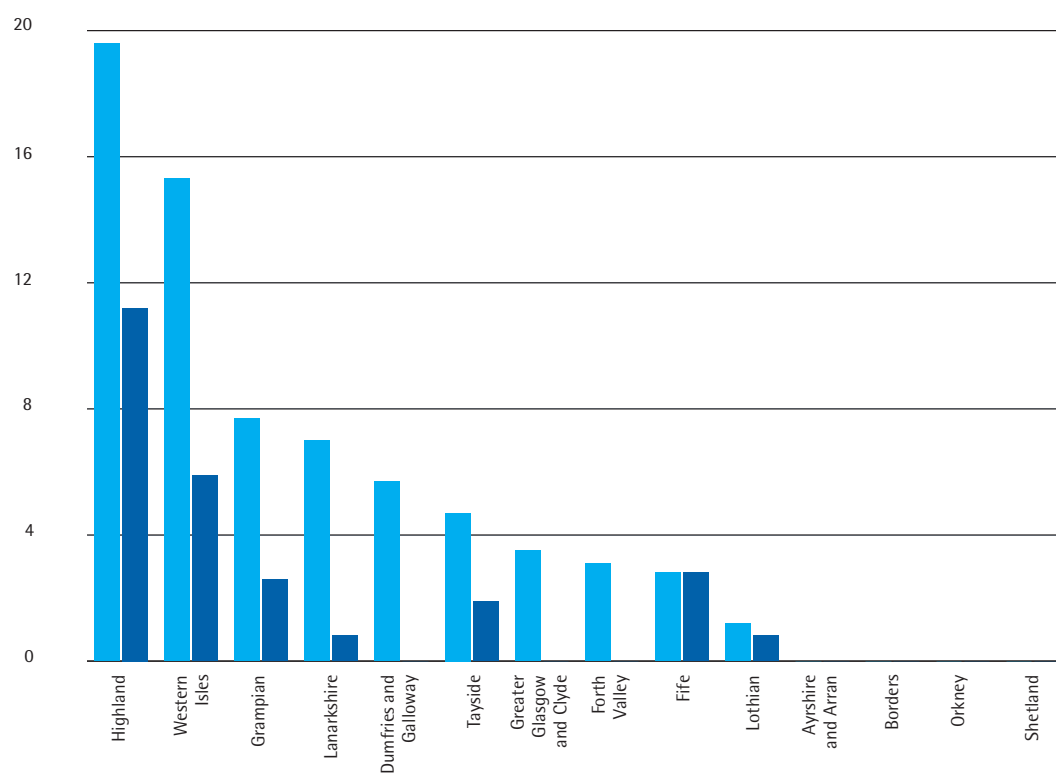
■ % of midwife posts vacant for more than three months

Source: ISD Scotland

Midwifery vacancies



Midwifery vacancies by NHS board (as at March 2018)



Source: ISD Scotland



Royal College of Midwives, Scotland
37 Frederick Street
Edinburgh
EH2 1EP
0300 303 0444
info@rcm.org.uk
www.rcm.org.uk