

Health and Care (Staffing) (Scotland) Act 2019

12IR HIS: Monitoring and Development of Staffing Tools

Maternity Services Staffing Level Tool Version 1

1.0 Introduction

Healthcare Improvement Scotland (HIS) recommends to Scottish Ministers revisions to the staffing tools, prescribed under section 12IJ (3) of the Health and Care (Staffing) (Scotland) Act 2019 (HCSA) as follows:

The replacement of the 'Maternity Staffing Level Tool Version 3' with a new staffing level tool 'Maternity Services Staffing Level Tool Version 1'

- **Staffing tool:** Maternity Services Staffing Level Tool Version 1
- **Type of health care:** Maternity provision
- **Location:** Hospitals and community settings
- **Employees:** Registered Midwives (*includes other individuals providing care for patients and acting under the supervision of, or discharging duties delegated to the individual by the registered midwife.*)

2.0 Replacement: Maternity Staffing Level Tool

- 2.1 The extant Maternity Staffing Level Tool was developed and adapted to encompass both community and hospital settings for maternity services. Following observation studies, the staffing level tool was trialled and tested in 2013-2014, with further adaptations in 2015. Dr Kieth Hurst was consulted as an external expert advisor during the period of development.
- 2.2 In 2017, the Scottish Government launched [The Best Start: a five-year plan for maternity and neonatal care](#). This produced a significant change to the service model of care within midwifery teams with variation across Scotland. A national run of the existing staffing level

tool was commissioned by the Chief Nursing Officers Directorate (CNOD) and undertaken in 2019 to inform its 'refresh' and provide clarity on the following key areas:

- Transitional care - which was not widespread when tool developed generating concern that mum and baby are not identified individually
- Increased travel resulting from the Best Start implementation within integrated teams
- Theatre activity not included in current tool
- Intrapartum work undertaken by community continuity /integrated midwife recorded in labour ward and not community teams

- 2.3 The learning from the 2019 run included comparing outputs from NHS board 'early adopter teams' testing Best Start with the traditional service models of care in others. [The Midwifery Workforce and Education Review for Scotland](#) report was published in March 2021 and included outputs of the 2019 maternity tool run.
- 2.4 Levels of care have now been reviewed and revised by the expert working group to capture the level of care and associated workload required for mother and baby separately.
- 2.5 Observation studies commenced in March 2024. Sampling methodology was utilised to ensure data was captured across all maternity specialties and was representative of the variance across NHS Scotland, including patient demographics and health boards. Additional observation studies have taken place in 2025 to gather further sub-specialty data to inform multiplier development.
- 2.6 To ensure that best practice is reflected in the new staffing level tool outputs, each clinical area selected was required to undertake a Quality Audit (QA). The threshold for the QA was set at 70%. Although a score of > 70% is deemed to exhibit best practice, if the area scores lower, this is not deemed an indicator of poor service, rather it is used to highlight areas for improvement. Those that did not meet the QA threshold were offered the opportunity to explore further, with local leadership teams being made aware.
- 2.7 The additional observation studies will be concluded in November 2025 with the data captured for inpatient and outpatient/community settings to develop a suite of 'multipliers' for the different sub-specialties as follows:
- Antenatal
 - Intrapartum
 - Postnatal
 - Triage / Maternity Assessment
 - Maternity Outpatients
 - Community Midwifery Units / Teams

- 2.8 The aim is that the multipliers inform the number of midwifery care hours per patient day (CHPPD) at different levels of dependency/acuity required within these specialties. The total number of care hours then informs a recommended whole time equivalent (WTE), inclusive of the national predicted absence allowance (PAA). This will inform the output of the new Maternity Services Staffing Level Tool to be utilised by NHS boards as part of their legislative duty to follow the Common Staffing Method under section 12IJ of the Health and Care (Staffing) (Scotland) Act 2019.
- 2.9 To ensure the multipliers provide meaningful staffing recommendations the Healthcare Staffing Programme (HSP) team have gathered test data from across NHS Scotland to retrospectively apply the multipliers. The HSP are undertaking correlation analysis with the boards actual staffing and professional judgement and the recommended output from the multipliers and the tool.
- 2.10 The final Maternity Services Staffing Level Tool will be presented back to the expert working group prior to progressing through HIS's governance structures for approval as the replacement tool.
- 2.11 There is a moderate risk the data from observation studies does not support the development of effective multipliers to inform appropriate staffing levels, necessitating HIS to revoke its recommendation. This would result in a further six month minimum delay to the availability of the staffing level tool. The work on the multipliers will be concluded by December 2025 prior to the publication of the full report on the [HIS website](#) in January 2026. This provides sufficient time for a level of confidence to be ascertained prior to the amended regulations being laid before parliament in February 2026.

3.0 Recommendations

- 3.1 HIS recommend the following amendments to The National Health Service (Common Staffing Method) (Scotland) Regulations 2025, that accompany the Health and Care (Staffing) (Scotland) Act 2019, as follows:

Maternity

- Schedule Staffing Level Tools Column 1 Kind of health care Provision: 'Maternity provision by Registered Midwives in Maternity units in hospitals and community' – remains unchanged
- Schedule Staffing Level Tools Column 2 Staffing level tool:

'Maternity Staffing Level Tool Version 3 (8)'

(8) Version 3 was developed by Healthcare Improvement Scotland and was made available online at [NHS Scotland Login](#), in 2025, to those granted access.

Replacement with a new staffing level tool as follows:

‘Maternity Services Staffing Level Tool Version 1 (8)’

(8) Version 1 was developed by Healthcare Improvement Scotland and made available online on the RLDatix SafeCare Platform as part of the national e-rostering contract, in 2025, to those granted access.

The link to the online tool has not been included due security concerns. The RLDatix system is hosted on the world wide web and not behind the NHS SWAN network. In addition, all NHS boards would have a separate URL to their own instance of the system requiring the regulations to include multiple different links for this one staffing level tool.