

April 8<sup>th</sup> 2021

Dublin 2

Deputy Tóibín Dáil Éireann, Leinster House Clár Sláinte Náisiúnta do Mhná & do Naíonáin

Feidhmeannacht na Seirbhíse Sláinte, Aonad 7A, Áras Dargan, An Ceantar Theas, Baile Átha Cliath 8 T: 076 695 9991

National Women and Infants Health Programme

Heuston South Quarter, Dublin 8

Health Service Executive, Unit 7A, The Dargan Building, T: 076 695 9991

PQ Ref 14077/21 To ask the Minister for Health the amount spent on structural, capital and administrative areas relating to the roll-out of termination of pregnancy services; and the breakdown for each area.

Dear Deputy Tóibín

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

In relation to the spend within the acute hospital sector regarding the development and roll-out of termination services, as set out in the response to you dated 17th February 2021 regarding your PQ 5186/21, the acute hospital system was allocated €7 million in 2019 to support the roll-out of termination services as of 1st January 2019.

In 2020, a further additional €9.5 million was allocated for the provision of termination services under the Health (Regulation of Termination of Pregnancy) Act 2018, comprising of €5 million existing level service funding for the acute hospital sector in relation to the provision of this service, with the remainder of the additional funding allocated to fund and support the continued provision and expansion of the delivery of termination of pregnancy services in the community setting, including €1 million funding provided for crisis pregnancy counselling and information helpline service and €1 million funding for ongoing communication campaigns.

This development funding was used to recruit additional personnel resources across a range of sites to implement this new service within the hospital sector. Resources supported by this investment included additional consultant obstetricians and gynaecologists, midwives and nurses, ultrasonographers, theatre staff, bereavement specialists, administrators, medical social workers and pharmacists. These resources, whilst funded and established utilising funding provided to support termination of pregnancy services, have developed and being embedded within existing gynaecology and maternity services such that termination of pregnancy service is just one of the areas of responsibilities that they hold on the ground.

This funding was allocated to the six hospital groups, proportionate to their levels of activity.

IEHG	€1.55m
DMHG	€1.25m

ULHG	€0.55m
RCSI	€1.45m
SSWHG	€1.2m
SAOLTA	€1m

The 2020 funding has been allocated on the same basis as the 2019 funding, but also included the development of a new fetal MRI service.

In terms of structural and capital investment, termination of pregnancy services were developed and are delivered within existing clinical infrastructure i.e. there were no new capital or structural builds undertaken to support the implementation of this service. Rather relatively modest levels of funding were provided to hospital sites as required to enable small scale privacy refurbishments and equipping projects so as to ensure that the service could be provided safely and in a manner cognisance of the woman's requirement for privacy and dignity. Examples of such support for sites would include supporting the partitioning off of dedicated clinical space, acquisition of required ultrasound machines, examination couches, relevant theatre equipment, blood pressure and ECG monitors etc.

In relation to primary care spend, €231,000 was provided to women's health care clinics in 2019 and €212,000 in 2020 to fund minor capital works, additional security measures and administration support.

I trust this clarifies the matter.

Yours sincerely,

Kilian McGrane, Director, National Women and Infants Health Programme