

Clár Sláinte Náisiúnta do Mhná & do Naíonáin

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National Women and Infants Health Programme

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24th November 2021

Deputy Cairns, Dáil Éireann, Leinster House Dublin 2

PQ53364/21: To ask the Minister for Health the progress made in regard to a report recommendation (details supplied*).

Dear Deputy Cairns,

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 March 2020 HIQA released their 'Overview report of HIQA's monitoring programme against the National Standards for Safer Better Maternity Services, with a focus on obstetric emergencies'. The report outlines 8 recommendations for the HSE. You have queried the progress made in regards to Recommendation 3.

Recommendation 3 outlines that:

The HSE should conduct a review of current workforce arrangements in each maternity unit or hospital nationally to determine the required levels of staff and skill-mix needed in the medical specialties of obstetrics, anaesthesiology, paediatrics and neonatology and the professions of midwifery and nursing. This review should be evidenced based and be used to inform workforce planning to meet current and future demand for services at maternity unit and hospital level and across each maternity network.

Under the auspices of the National Women and Infants Health Programme, work commenced in this area in 2017, with NWIHP developing close and collaborative relationship with the six maternity networks and their 19 maternity sites and services. Based on this work, key deficiencies were identified across the services including the need for increased consultant posts, increased specialist midwifery posts across an array of services including perinatal mental health, lactation, foetal medicine, diabetes, clinical skill facilitation, parenteraft and advanced midwifery practice, increased numbers of staff midwives to support the development of the model of care with particular emphasis on the supported care pathways, increased availability of allied health professionals particularly in the area of medical social work, dietetics and physiotherapy and increased administrative and HCA support.

Based on these on-going assessments and working closely with the services with a view to working towards ensuring that all women were able to access to same level of safe maternity care irrespective of location, NWIHP have approved and funded over 450 additional posts for our maternity, neonatal and gynaecology services between 2018 and 2021 including 29 additional consultant obstetrician and gynaecologists posts, 250 additional midwifery and nursing posts across a range of services and almost 70 additional allied health professional post.

These posts have been enabled by funding provided to NWIHP by the Department of Health over this period in the area of women's and neonatal health, which totals an additional investment of €43.4 million as of the end of 2021. This funding has enabled both increased capacity and specialisation within our maternity services but has also support the provision of enhanced neonatal services, termination of pregnancy services, ambulatory gynaecology and related services and regional secondary level fertility services.

In moving forward, and in light of the HIQA recommendation, NWIHP is actively reflecting on investment to date and associated issues including core deficiencies already addressed, stage of development of new model of care, changes in service provision on the ground, increased complexities amongst women giving birth, continuing capacity and expertise constraints etc.

To this end, NWIHP late in 2020/early 2021 undertook a high level desk top baseline audit of midwifery and nursing staffing in maternity, neonatology and gynaecology across the 19 services with a view to informing a more detailed workforce assessment exercise and underpinning further investment in 2022 in these areas.

Additionally NWIHP is commencing a structured work programme in the area of workforce planning involving HSE Acute Operations, HSE National HR Workforce Planning Function, HSE NDTP and others as appropriate in terms of designing and implementing a multi-disciplinary work force plan for maternity, gynaecology and neonatal services spanning the next 5-10 year period. This work is at a relatively early stage; however NWIHP is targeting the completion of this plan by the end of 2022.

I trust this clarifies the matter.

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Yours sincerely,

Mary-Jo Biggs, General Manager, National Women and Infants Health Programme

